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ABSTRACT

In order for individuals to make informed decisions about their health, they must have support, information, and skills to help them understand what promotes their health and what they themselves can do to enhance health. The major goals of the Northwest Territories (Canada) school health program are: to provide factual information on the human body; to enable students to develop skills that, along with factual information, will allow them to make informed choices related to health; to enhance students' self-esteem through self-understanding; to enable students to develop attitudes which lead to positive lifestyle behaviors; and to promote lifestyle practices which are conducive to lifelong health. This guide contains instructional strategies, lesson plans, reproducibles, and teacher background materials for first-grade classes. The material is organized around the seven units of the program: mental and emotional well-being, growth and development, family life, alcohol and other drugs, nutrition, safety and first aid, and dental health. This guide also contains an introduction to the complete program, including scope and sequence charts outlining the major topics at each grade level. A discussion of the language development approach for students who are not proficient in English is also included. (IAH)

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# Northwest Territories
# *School Health Program*

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## Grade 1

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NORTHWEST TERRITORIES

# School Health Program

## GRADE 1

Northwest Territories Education
Health

March, 1991

NORTHWEST TERRITORIES

# School Health Program

## INTRODUCTION

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NORTHWEST TERRITORIES

# School Health Program

## PHILOSOPHY AND RATIONALE

## THE RATIONALE FOR HEALTH EDUCATION

Traditionally, almost all human and financial resources related to health care in the Northwest Territories have been devoted to acute treatment of illnesses in nursing stations, doctors' offices, hospitals and drug treatment centres. The human and financial costs of this approach have been high.

This approach has led to dependence on medical institutions and professionals. As a result, there is a recognized need to promote a more comprehensive approach to health, especially as it relates to lifestyle. In addition to acute care services, this new approach would include education, environmental changes and greater individual responsibility for health.

## THE NEED FOR A HEALTH EDUCATION PROGRAM IN N.W.T. SCHOOLS

Dr. Otto Schaefer, a well-known northern medical officer, has shown that abrupt changes in the diet of native populations have contributed to an increasing incidence of non-communicable diseases, such as cancer and obesity, as well as diseases of the respiratory and circulatory systems. Furthermore, according to Dr. Schaefer, the breakdown of the traditional social structure, specifically the family unit, is associated with wide-spread alcohol and drug abuse, increases in sexually transmitted diseases, family violence and suicide.

In November 1982, the survey "Tobacco Use Among Students in the Northwest Territories" reported that smoking rates in the school population of the N.W.T. were among the highest recorded for any school population in Canada. Smoking started in the early years of elementary school and by the late adolescent years (15 to 19), 49% of boys and 53% of girls were regular smokers. It also found that approximately 9% of Northwest Territories school children used chewing tobacco or snuff. It concluded that four variables were important in the decision to smoke — age, smoking behaviour of friends, smoking behaviour of brothers or sisters and parental smoking.

In 1984, according to the "Report on Health Conditions in the Northwest Territories", accidents, injury and violence accounted for more than 30% of all deaths. The rates for suicide, infant deaths, sexually transmitted diseases and teenage pregnancies were all above the national average.

In addition, there is evidence from treatment centres, that more and more young people are seeking help for drug problems at a younger age.

Also in 1984, the Social Program Evaluation Group from Queen's University, with a grant from Health and Welfare Canada, conducted the Canada Health Attitudes and Behaviours Survey in all provinces and territories. They conducted this survey in a number of selected communities in the Northwest Territories among Grade 4, Grade 7 and Grade 10 students. It concluded that with respect to:

**Nutrition**
- young people in the Northwest Territories were well below the national average for Grade 4 and Grade 7, and slightly below for Grade 10, in meeting the daily requirements of all four food groups (both in amount and variety);
- young people at all three grade levels consumed more foods with a high sugar content than their southern counterparts.

**Alcohol & Drug Use**
- higher than average percentage of Grade 7 and Grade 10 students in the Northwest Territories smoked cigarettes;
- of Grade 10 students, lower numbers used alcohol (some communities in which the surveys were conducted were "dry" communities);
- there was an extremely high incidence of cannabis use.

**Self-esteem**
- Northwest Territories young people felt slightly less positive about themselves and their relationships with their parents than other young Canadians.

**Family Life Education**
- a higher proportion of students in the N.W.T. than elsewhere in Canada learned about human sexuality in school.

Many of the problem health conditions identified in these and other studies are related to lifestyle behaviours and unhealthy environmental conditions which can be modified by the individual.

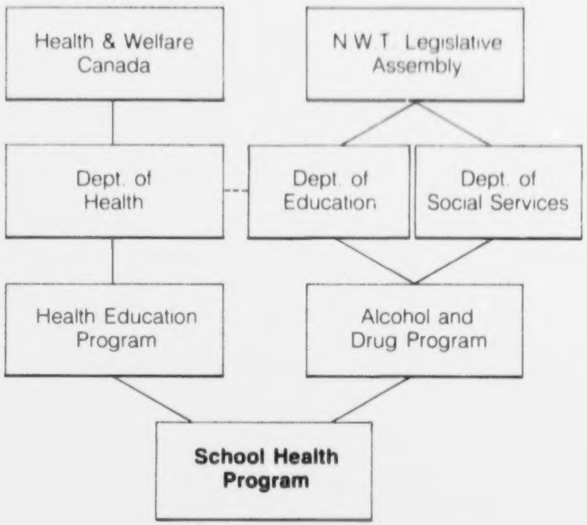
## THE HISTORY OF THE N.W.T. SCHOOL HEALTH PROGRAM

Prior to 1979, teachers in the Northwest Territories had no formal health program to follow. In 1979, the Department of Education published "***The Northwest Territories Community School Health Program.***" It outlined the goals which students should achieve by the end of Grade 9. Although the list of goals provided teachers with a framework for unit and lesson planning, it was not a comprehensive health program.

In 1983, on the premise that many of the health problems which exist in the Northwest Territories could be prevented or reduced through an education program in the schools, the Northwest Territories Department of Health received funding from Health and Welfare Canada to develop a program for Kindergarten to Grade 12 students in consultation with the Department of Education.

At the same time, the Northwest Territories Legislative Assembly allocated separate funding to the Department of Social Services and the Department of Education to develop an Alcohol and Drug Program for schools.

These two programs together form the Northwest Territories School Health Program.


Health & Welfare Canada
N.W.T. Legislative Assembly
Dept. of Health
Dept. of Education
Dept. of Social Services
Health Education Program
Alcohol and Drug Program
School Health Program

## ASSESSING THE HEALTH NEEDS OF N.W.T. SCHOOL CHILDREN

The public, particularly parents and students, must accept a health education program in order for it to have an impact on their everyday lives. Such acceptance requires involvement. Local involvement also ensures the relevance of the program to the students for whom it is designed.

To ensure input by northerners, the Department of Health established two advisory committees with members representing professional, cultural and regional groups. These advisory committees provided general overall direction to the project.

The program staff conducted a comprehensive needs assessment to assess the perceived health needs of students in communities.

They distributed questionnaires to the following selected groups of people in every community in the Northwest Territories:
- pre-adolescent students and their parents
- adolescent students and their parents
- Local Education Authorities
- teachers
- administrators

The questionnaires asked:
- what aspects of health students were interested in;
- what parents thought it was important for their children to learn about health; and,
- what Local Education Authorities and teachers perceived the needs of the students in their local school were.

Well over 3000 people responded to the questionnaires. They made a significant contribution to this program by articulating the health needs of students.

At the same time, researchers examined statistical data about the delivery of health care in the Northwest Territories to determine why people in various age groups sought professional health care. They found, for example, that, in the 15-19 age group, the main reasons for health care were a result of injuries or poisoning. This was closely followed by diseases of the respiratory system.

Evidence from:
- the examination of problem health conditions in the N.W.T.
- the assessment of student health needs by themselves and others close to them, and
- the analysis of reasons why people seek medical help

indicates that many young people are seeking treatment for problem conditions which could have been prevented. Young people must be encouraged to accept responsibility for their own health in order to maintain and enhance personal health.

## A VISION OF HEALTH

Health is a state of complete physical, mental and social well-being. It is the result of a dynamic interdependence of these elements, as well as cultural and spiritual elements. Any change which occurs in one dimension will affect the others.

To reach a state of complete well-being, an individual must be able to realize aspirations, satisfy needs and change or cope with the environment.

This vision of health and the premise that health is a resource for everyday life serves as a basis for the Northwest Territories School Health Program.

The World Health Organization states "Health promotion is the process of enabling people to increase control over, and to improve, their health."

This is done in three ways:
- through self-care i.e., making decisions and adopting practices which specifically preserve their health;
- through mutual aid i.e., helping each other, supporting each other emotionally, sharing ideas, information and experiences;
- through creating healthy environments i.e., altering or adapting social, economic and physical surroundings to maintain and enhance health.

In order for individuals to make informed decisions with regard to their health, they must have support, information and skills to help them understand what promotes their health and what they themselves can do to enhance health.

This is the focus of the Northwest Territories School Health Program.

## THE ROLE OF SCHOOLS IN HEALTH PROMOTION

Health promotion is specifically dedicated to enabling individuals to take the lead role in determining the status of their own health. The growing commitment to health education programs in schools can create a supportive environment for the development of healthy practices by providing information and encouraging change. Many jurisdictions now acknowledge the importance of health to quality of life by requiring health education as part of the school curriculum.

It is important to articulate the role of the school in health promotion. It is also important to recognize the limitations of the school's role. The public expects a program such as the Northwest Territories School Health Program to solve all the current social, emotional or physical conditions which contribute to a less than perfect state of well-being among students. That is not the role of health education in the school. The School Health Program does complement the efforts of other agencies in health promotion in the N.W.T. by specifically providing information and by developing skills and attitudes to enable individuals to take the lead role in attaining healthy life styles. The school cannot, however, make the student choose a healthy lifestyle.

By providing information and by developing skills, the school, however, does influence beliefs and attitudes, and it is these changing beliefs and attitudes that impact on behaviour.

Health behaviour is related to the general beliefs:
- that people are vulnerable to problem health conditions;
- that these conditions produce undesirable consequences; and,
- that the consequences are usually preventable.

By influencing these health beliefs positively, the school will increase the probability of positive health behaviours.

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NORTHWEST TERRITORIES

# School Health Program

## IMPLEMENTATION

# MAJOR GOALS

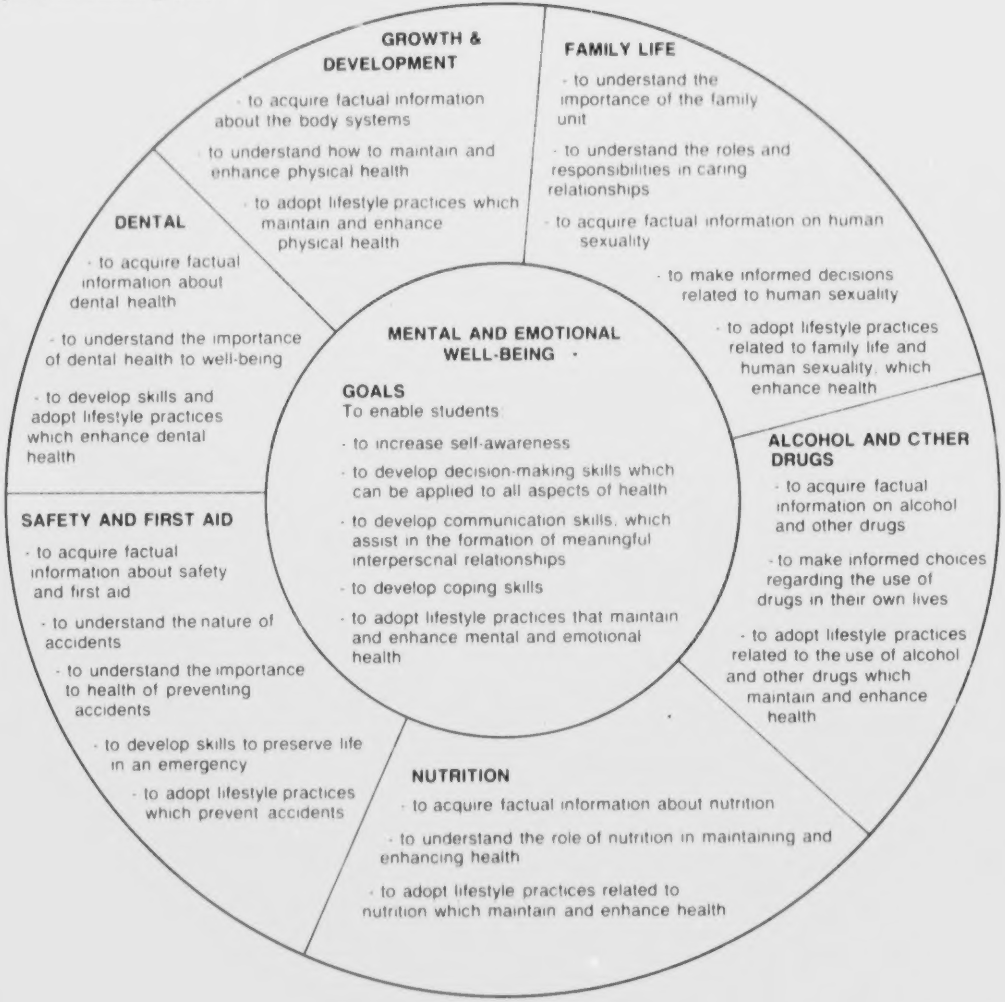
## OF THE NORTHWEST TERRITORIES SCHOOL HEALTH PROGRAM

The major goals of the Northwest Territories School Health Program are:

- *to provide factual information on the human body;*
- *to enable students to develop skills that, along with the factual information, will allow them to make informed choices related to health;*
- *to enhance students' self-esteem through self-understanding;*
- *to enable students to develop attitudes which lead to positive lifestyle behaviours; and,*
- *to promote positive lifestyle practices which are conducive to lifelong health.*

## THE UNITS OF THE PROGRAM

There are seven units in the program. The central unit is Mental and Emotional Well-Being. It is the major skill-building unit.



**GROWTH & DEVELOPMENT**

- to acquire factual information about the body systems
- to understand how to maintain and enhance physical health
- to adopt lifestyle practices which maintain and enhance physical health

**FAMILY LIFE**

- to understand the importance of the family unit
- to understand the roles and responsibilities in caring relationships
- to acquire factual information on human sexuality
- to make informed decisions related to human sexuality
- to adopt lifestyle practices related to family life and human sexuality, which enhance health

**DENTAL**

- to acquire factual information about dental health
- to understand the importance of dental health to well-being
- to develop skills and adopt lifestyle practices which enhance dental health

**MENTAL AND EMOTIONAL WELL-BEING**

**GOALS**
To enable students:

- to increase self-awareness
- to develop decision-making skills which can be applied to all aspects of health
- to develop communication skills, which assist in the formation of meaningful interperscnal relationships
- to develop coping skills
- to adopt lifestyle practices that maintain and enhance mental and emotional health

**ALCOHOL AND CTHER DRUGS**

- to acquire factual information on alcohol and other drugs
- to make informed choices regarding the use of drugs in their own lives
- to adopt lifestyle practices related to the use of alcohol and other drugs which maintain and enhance health

**SAFETY AND FIRST AID**

- to acquire factual information about safety and first aid
- to understand the nature of accidents
- to understand the importance to health of preventing accidents
- to develop skills to preserve life in an emergency
- to adopt lifestyle practices which prevent accidents

**NUTRITION**

- to acquire factual information about nutrition
- to understand the role of nutrition in maintaining and enhancing health
- to adopt lifestyle practices related to nutrition which maintain and enhance health

## .SCOPE AND SEQUENCE

The following charts provide an overview of the major topics, indicating at which grade they are taught.

| UNIT | KINDERGARTEN | GRADE 1 | GRADE 2 | GRADE 3 |
|---|---|---|---|---|
| **Mental & Emotional Well-Being** | **Self awareness**<br>• physical characteristics<br>• abilities<br>• feelings<br>**Relationships**<br>• doing things with friends | **Self awareness**<br>• physical characteristics<br>• abilities<br>• likes and dislikes<br>**Relationships**<br>• working and playing together<br>• helping<br>• sharing | **Self awareness**<br>• feelings<br>• expressing feelings appropriately<br>**Relationships**<br>• friends<br>• making friends<br>**Coping**<br>• stressful situations | **Self awareness**<br>• people are alike and different<br>• everyone is unique<br>**Relationships**<br>• responsibilities<br>• sharing responsibilities<br>• different ways of communicating<br>**Decision-Making**<br>• choices<br>• situations which require decisions |
| **Growth & Development** | **Body Systems**<br>• external body parts<br>• five sensory organs<br>**Lifestyle**<br>• positive daily and regular health habits | **Body Systems**<br>• touch<br>• taste<br>• smell<br>**Disease Prevention**<br>• signs of sickness<br>• germs spread diseases<br>• disease prevention | **Body Systems**<br>• sight<br>• hearing<br>**Lifestyle**<br>• positive health habits<br>**Health Care**<br>• community health care workers<br>**Environmental Health**<br>• clean water, air and good soil | **Body Systems**<br>• internal organs<br>**Growth Patterns**<br>• changes in height and weight<br>**Disease Prevention**<br>• personal responsibility for health<br>**Environmental Health**<br>• different kinds of pollution |
| **Family Life** | | **Families**<br>• different members<br>• similarities/differences in family structures<br>**Human Development & Reproduction**<br>• external body parts/boys/girls<br>**Abuse Prevention**<br>• feelings associated with touch<br>• safety rules<br>• family/community support people | **Families**<br>• families provide for the needs of their members<br>• the maintenance of the family unit<br>**Human Development & Reproduction**<br>• living things reproduce and grow<br>**Abuse Prevention**<br>• potentially abusive situations<br>• behaviours that maintain personal safety | **Families**<br>• family structure changes with time<br>• new family members<br>• some family members require special care<br>**Human Development & Reproduction**<br>• body organs related to reproduction<br>• human babies are created from the union of a sperm and egg |

## SCOPE AND SEQUENCE

| UNIT | KINDERGARTEN | GRADE 1 | GRADE 2 | GRADE 3 |
|---|---|---|---|---|
| **Nutrition** | **Food Identification**<br>• foods and non-foods<br>**Food Appreciation**<br>• healthy snacks<br>• unfamiliar foods | **Food Identification**<br>• foods from plants and animals<br>**Food Classification**<br>• four food groups<br>**Food Selection**<br>• food from each food group<br>**Food Appreciation**<br>• nutritious food to start the day | **Food Identification**<br>• different food forms<br>**Food Classification**<br>• functions of each food group<br>• nutritious snacks<br>**Food Selection**<br>• nutritious meals<br>**Food Appreciation**<br>• different food forms | **Food Classification**<br>• classifying into food groups<br>• function of each food group<br>• common foods which do not belong to a food group<br>**Food Selection**<br>• nutritious eating for one day<br>**Food Appreciation**<br>• nutritious food to start the day |
| **Dental** | **Structure and Function**<br>• primary and permanent teeth<br>• teeth functions<br>**Oral Hygiene**<br>• toothbrushing skills<br>**Dental Health**<br>• safe and unsafe food | **Structure and Function**<br>• primary and permanent teeth<br>• teeth functions<br>**Oral Hygiene**<br>• toothbrushing skills<br>**Dental Health**<br>• safe and unsafe food<br>• safe and unsafe behaviours<br>**Dental Disease**<br>• tooth decay<br>**Dental Services and Products**<br>• local dental health workers | **Structure and Function**<br>• primary and permanent teeth<br>**Oral Hygiene**<br>•flossing skills<br>**Dental Health**<br>• safe and unsafe snacks<br>**Dental Disease**<br>• dental plaque<br>**Dental Services and Products**<br>• common dental health products | **Structure and Function**<br>• specific tooth groups and their functions<br>**Oral Hygiene**<br>• toothbrushing and flossing skills<br>**Dental Disease**<br>• dental plaque<br>**Dental Services and Products**<br>• personal responsibility for dental health care<br>• community dental health workers |
| **Safety & First Aid** | **Personal Safety**<br>• personal safety rules<br>• personal identity facts<br>• community safety helpers<br>• safety rules for pedestrians<br>**Fire Safety**<br>• fire drill procedures<br>**Safety**<br>• poisons<br>• poison warning sign<br>• tasting unknown substances<br>• hazard warning signs | **Personal Safety**<br>• personal safety rules<br>• personal identity facts<br>• community safety helpers<br>• emergency phone calls<br>**Accident Prevention**<br>• burns and scalds<br>• falls<br>**First Aid**<br>• first aid for minor cuts<br>**Safety**<br>• poisons<br>• sniffing unsafe substances<br>• tasting unknown substances | **Burn Prevention**<br>• safety rules around electricity<br>**Bicycle Safety**<br>• bicycle rules and traffic laws<br>**Outdoor Safety**<br>• frostbite<br>**Firearm Safety**<br>• firearm safety rules<br>**First Aid**<br>• nosebleeds<br>**Safety**<br>• hazard warning signs<br>• common unsafe substances<br>• rules for unsafe substances | **Burn Prevention**<br>• burns and scalds<br>**Fire Safety**<br>• clothes on fire<br>• burning buildings<br>**Outdoor Safety**<br>• ice safety<br>**Personal Safety**<br>• animal bites<br>**Safety**<br>• hazard warning signs |
| **Alcohol & Other Drugs** |  | **Drugs**<br>• medicine safety | **Drugs**<br>• medicines are drugs<br>• medicines may be helpful and harmful | **Drugs**<br>• sources of medicines<br>• rules for medicines<br>• common substances which contain drugs<br>**Tobacco**<br>• effects of tobacco<br>**Well-Being**<br>• improving their well-being |

## SCOPE AND SEQUENCE

| UNIT | GRADE 4 | GRADE 5 | GRADE 6 |
|---|---|---|---|
| **Mental & Emotional Well-Being** | **Self awareness**<br>• strengths and weaknesses<br>• activities affect how people feel<br>**Relationships**<br>• caring behaviours<br>**Decision-Making**<br>• the effects of choices<br>• peer influence<br>• resisting peer pressure | **Relationships**<br>• communication/effective speaking/ active listening<br>• assertive communication skills<br>• the refusal process<br>**Decision-Making**<br>• advertising influence<br>**Coping**<br>• stressful situations<br>• signs of stress<br>• ways of dealing with stress | **Relationships**<br>• responsibilities in maintaining a relationship<br>• volunteerism<br>**Decision-Making**<br>• values<br>• the decision-making process<br>• group decisions<br>**Coping**<br>• time management<br>**Lifestyle**<br>• assessing/improving personal characteristics |
| **Growth & Development** | **Body Systems**<br>• digestive system<br>**Disease Prevention**<br>• communicable/non-communicable diseases<br>**Environmental Health**<br>• safe drinking water<br>**Health Care System**<br>• health care supports | **Body Systems**<br>• respiratory system/circulatory system<br>• lifestyle behaviours for a healthy cardiovascular system | **Body Systems**<br>• excretory system/nervous system<br>**Disease Prevention**<br>• germ entry into the body<br>• the three lines of defence<br>• AIDS prevention |
| **Family Life** | **Families**<br>• families provide for the needs of their members<br>• family traditions<br>**Human Development and Reproduction**<br>• characteristic changes of puberty<br>• reproductive system<br>• menstruation (optional lesson for girls only)<br>**Abuse Prevention**<br>• touches that produce negative or confused feelings<br>• family/community support people | **Families**<br>• male/female roles<br>• family activities<br>**Human Development and Reproduction**<br>• characteristic changes of puberty<br>• reproductive system<br>• menstruation<br>• reproductive process/sex cell development/journey of sperm/ intercourse/fertilization | **Families**<br>• responsibilities and relationships change with time<br>• importance of elders<br>**Human Development and Reproduction**<br>• endocrine system<br>• relationship between puberty and the endocrine system<br>• relationship between reproduction and menstruation<br>• reproductive process/stages of fetal development<br>**Abuse Prevention**<br>• sexual abuse/behaviours which prevent abuse<br>• family/community support people |

## SCOPE AND SEQUENCE

| UNIT | GRADE 4 | GRADE 5 | GRADE 6 |
|---|---|---|---|
| **Nutrition** | **Food Classification**<br>• six major nutrients<br>• sources of major nutrients<br>• nutritious and non-nutritious snacks<br>**Food Selection**<br>• factors that affect food choices<br>**Food Appreciation**<br>• nutritious snacks | **Food Classification**<br>• leader nutrients and their functions<br>• sources of leader nutrients<br>**Food Selection**<br>• recommended daily servings<br>• food availability<br>• food processing<br>**Food Appreciation**<br>• a nutritious northern meal | **Food Classification**<br>• leader nutrients and their functions<br>• sources of leader nutrients<br>**Food Selection**<br>• serving sizes<br>• balanced food intake<br>• reading food labels<br>**Lifestyle**<br>• personal nutrition program |
| **Dental** | **Structure and Function**<br>• structure and functions of teeth<br>**Oral Hygiene**<br>• oral hygiene skills<br>• healthy dental behaviours<br>**Dental Health**<br>• dental hazards<br>• preventing dental injuries<br>**Dental Disease**<br>• tooth decay<br>• fluoride<br>**Dental Services and Products**<br>• dental health care | **Oral Hygiene**<br>• toothbrushing and flossing skills<br>**Dental Health**<br>• effects of tobacco products<br>**Dental Services and Products**<br>• benefits and disadvantages of dental health products<br>• homemade toothpaste<br>• role of dental health workers | **Structure and Function**<br>• structure and functions of teeth<br>**Oral Hygiene**<br>• oral hygiene skills<br>• healthy dental behaviours<br>**Dental Disease**<br>• common dental health problems<br>• signs of dental health problems<br>• treatment for dental health problems<br>• preventing dental health problems<br>**Lifestyle**<br>• personal dental health program |
| **Safety & First Aid** | **Burn Prevention**<br>• scalds<br>**Bicycle Safety**<br>• bike maintenance<br>• bike skills and safety rules<br>**Fire Safety**<br>• common causes of fire<br>• fire exit plans<br>• individual responsibility<br>**First Aid**<br>• frostbite and hypothermia<br>**Motor Vehicle Safety**<br>• all terrain vehicles<br>• snowmobiles | **Burn Prevention**<br>• burns from flames<br>• burns from electricity<br>**Fire Safety**<br>• home/campfire safety<br>**Outdoor Safety**<br>• safe camping<br>• water and ice safety<br>**First Aid**<br>• burns<br>• external bleeding | **Motor Vehicle Safety**<br>• all terrain vehicles<br>• snowmobiles<br>**Babysitting Safety**<br>• responsibilities<br>• common injuries<br>• safety rules<br>• emergencies<br>**Outdoor Safety**<br>• survival<br>**First Aid**<br>• artificial respiration<br>• choking<br>• external bleeding<br>• poisoning<br>• unconciousness<br>**Lifestyle**<br>• importance of first aid<br>• safety organizations and professionals<br>• personal safety and first aid program |
| **Alcohol & Other Drugs** | **Drugs**<br>• specific drugs in commonly used substances<br>• medical and non-medical drugs<br>• effect of drugs on the brain<br>• reasons for using/not using drugs<br>• personal responsibility for decisions about use of drugs<br>• use and misuse of drugs<br>**Caffeine**<br>• caffeine affects the body<br>**Alcohol**<br>• alcohol affects the body<br>• factors which determine the effects of alcohol<br>• reasons for using/not using alcohol<br>• misuse of alcohol<br>• community resources for alcohol problems<br>**Well-Being**<br>• feeling good without drugs | **Drugs**<br>• specific drugs in commonly used substances<br>• tobacco affects the body<br>• drug myths<br>• community resources for drug information<br>• peer pressure/advertising influence decisions about drug use<br>**Alcohol**<br>• short/long term effects of alcohol<br>• use and misuse of alcohol<br>• community resources for alcohol problems<br>**Well-Being**<br>• feeling good without drugs | **Drugs**<br>• personal responsibility for decisions about drug use<br>• values related to drug use<br>• drug myths<br>• peer pressure/advertising influence decisions about drug use<br>**Alcohol**<br>• factors which determine the effects of alcohol<br>• social effects of alcohol misuse<br>• effects of alcohol on young people<br>**Well-Being**<br>• individual activities which promote well-being<br>• leisure time activities in the community |

## SCOPE AND SEQUENCE

| UNIT | GRADE 7 | GRADE 8 | GRADE 9 |
|---|---|---|---|
| **Mental & Emotional Well-Being** | • self-esteem<br>• conversations<br>• criticism<br>• personal plan to enhance self-esteem | • characeristics of effective working groups<br>• reasons for forming group<br>• depression<br>• suicide<br>• stress<br>- causes<br>- methods of dealing with stress | • future career choices<br>• job seeking<br>• assessment of personal lifestyles<br>• personal plan to improve lifestyle |
| **Growth & Development** | • integumentary system/immune system<br>• common health problems of adolescence<br>• health behaviours which help prevent adult health problems<br>• physical fitness<br>- components<br>- personal plan | • skeletal system/muscular system<br>• personal exercise plan for the muscular system | • inter-relationship of the body system<br>• NWT Health Care system<br>- function<br>- responsible use<br>• economics of health care<br>• health careers |
| **Family Life** | • family decisions<br>• family communication<br>• reproductive system<br>- function<br>• relationship between endocrine system and the menstrual cycle<br>• stages of the reproductive process<br>• abstinence<br>• risks and consequences of early pregnancy<br>• sexually transmitted diseases<br>- AIDS<br>- chlamydia<br>- gonorrhea<br>- preventive behaviours<br>• sexual assault<br>- common myths<br>- consequences for victim and offender<br>• potentially dangerous situations<br>• behaviours which help prevent sexual assault | • family structures change<br>• menstruation<br>- the implications<br>• stages of the reproductive process<br>• abstinence and assertiveness<br>• positive health behaviours related to pregnancy<br>• sexually transmitted diseases<br>- AIDS<br>- syphilis<br>- trichomonas<br>- pubic lice<br>- preventive behaviours<br>• birth control<br>- methods<br>- attitudes<br>• family violence<br>- causal factors<br>- coping | • sex-role stereotyping<br>• effective parenting<br>• support systems for families<br>• reproductive system<br>- its role in the formation of new life<br>• heredity<br>• fetal development<br>- stages<br>- risk factors<br>• birth control<br>- risks and consequences<br>• unplanned pregnancy<br>- alternatives<br>- attitudes<br>- prevention<br>• positive lifestyle practices related to family life<br>• constructive relationships |

## SCOPE AND SEQUENCE

| UNIT | GRADE 7 | GRADE 8 | GRADE 9 |
|---|---|---|---|
| **Nutrition** | **Food Classification**<br>• NWT Food Guide<br>**Food Selection**<br>• menu planning for different age groups<br>**Food Consumerism**<br>• advertising affects food choices<br>• food additives<br>**Food Appreciation**<br>• food items with few additives | **Energy Balance**<br>• energy needs<br>• stored energy<br>• energy intake and output<br>**Food Consumerism**<br>• analyzing diets<br>**Lifestyle**<br>• weight control | **Food Selection**<br>• factors that influence food choices<br>• food customs in the NWT<br>• community feast menu<br>**Lifestyle**<br>• nutrition concerns in the NWT<br>• preventive behaviours<br>• Canadian nutrition and dietary recommendations<br>• personal nutrition program |
| **Dental** | **Dental Health**<br>• dental emergencies<br>**Dental Disease**<br>• common dental health problems of children and youth<br>• nursing bottle mouth | **Dental Health**<br>• safe, unsafe foods<br>**Dental Services and Products**<br>• professional preventive procedures<br>• fluoride<br>• common dental health products<br>**Lifestyle**<br>• personal action plan for dental health | **Dental Health**<br>• behaviours/factors that promote dental health<br>**Dental Careers**<br>• requirements for dental careers<br>**Lifestyle**<br>• positive lifestyle practices related to dental health |
| **Safety & First Aid** | **Babysitting Safety**<br>• responsibilities<br>• common injuries<br>• childcare routines and play<br>• safety rules<br>**Outdoor Safety**<br>• firearm safety<br>**First Aid**<br>• burns<br>• poisoning<br>**Lifestyle**<br>• safety organizations and professionals<br>• personal safety and first aid program | **Outdoor Safety**<br>• survival safety<br>• boating safety<br>• sports safety<br>**First Aid**<br>• frostbite/hypothermia<br>• head/eye injuries<br>• diabetic emergencies<br>• epileptic seizures/convulsions<br>• fainting<br>**Lifestyle**<br>• importance of first aid<br>• personal safety and first aid program | **First Aid**<br>• artificial respiration<br>• choking<br>• external/internal bleeding<br>• shock<br>• unconsciousness<br>• fractures, sprains, dislocations<br>• heart attacks, strokes<br>• poisoning<br>**Lifestyle**<br>• leading causes of injuries/accidental death<br>• personal safety and first aid program |
| **Alcohol & Other Drugs** | **Drugs**<br>• methods of taking drugs<br>• different categories of drugs<br>• traditional medicine<br>**Alcohol**<br>• different types of alcohol<br>• metabolism of alcohol<br>• effects of alcohol<br>• reasons for using/not using alcohol<br>**Cannabis**<br>• cannabis and the body<br>**Well-Being**<br>• peer pressure and drug use<br>• positive role models | **Drugs**<br>• dangers of combining drugs<br>• advertising influences decisions about drug use<br>**Alcohol**<br>• historical use of alcohol<br>• use, misuse, abuse of alcohol<br>• community resources for alcohol problems<br>• teenage alcohol problems<br>• fetal alcohol syndrome<br>• advertising influences decisions about alcohol use<br>**Cannabis**<br>• physical and psychological effects of cannabis<br>• cannabis and the reproductive system | **Drugs**<br>• drug groups<br>• side effects of drugs<br>• drugs and the law<br>**Alcohol**<br>• alcohol and the law<br>• The Young Offenders' Act<br>• local control of alcohol<br>**Well-Being**<br>• personal attitudes towards drug use |

## TIME ALLOCATION

Effective September 1987, Health Education will become a required part of the school curriculum.

During the first year of implementation, teachers will implement 40 hours of the program. Thereafter, the recommended minimum time allocation for health education will be 60 hours per year for Grade 1 to Grade 9 students. (Since many Kindergarten students attend school for only half a day, it is not possible to recommend 60 hours for that Grade. However, health education should be taught in Kindergarten.)

This means approximately 90 minutes per week for a school with a 190 day school year,

- or 3 x 30 minute lessons per week at the elementary level
- and 2 x 45 minute lessons per week at the junior high level.

The following recommended hourly time allocations apply to each unit:

Teachers should note that time requirements for Nutrition, Dental Health and Safety and First Aid have been calculated; however, these units will not be available until September 1988.

Differences in age, experience, language proficiency and developmental level will influence each student's learning. Some students may require enrichment activities or additional assistance. Some lessons will take more than one class period, but allowance has been made in the time allocations for this to happen.

Since Mental and Emotional Well-Being is the basic skill-building unit, and since Growth and Development contains much of the information about the body systems, the Department of Education recommends teaching these two units prior to introducing any other unit.

| **UNIT** | **GRADE** | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** |
| Mental & Emotional | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| Growth & Development | 10 | 10 | 10 | 10 | 10 | 10 | 8 | 8 | 8 |
| Family Life | 10 | 10 | 10 | 10 | 10 | 10 | 12 | 12 | 12 |
| Alcohol & Other Drugs | 6 | 6 | 6 | 8 | 8 | 10 | 10 | 10 | 10 |
| Nutrition | 8 | 8 | 8 | 8 | 8 | 6 | 6 | 6 | 6 |
| Dental | 8 | 8 | 8 | 6 | 6 | 6 | 4 | 4 | 4 |
| Safety & First Aid | 8 | 8 | 8 | 8 | 8 | 8 | 10 | 10 | 10 |

## THE LESSON FORMAT

The program is laid out in an easy-to-follow, easy-to-use format. Each lesson indicates the ***unit name, the grade level, lesson number*** and ***theme:***

e.g., Growth and Development
Grade 1 Lesson: 3 Theme: Body Systems

The ***concept*** for each lesson is clearly articulated at the start of the lesson. Concepts may be repeated within a single grade or between grades. The different objectives, however, ensure that students move from a basic understanding to a more advanced understanding of the same concept.

The ***preparation*** outlines all the tasks which a teacher will have to complete prior to teaching the lesson and all the materials or resources which are required for that particular lesson.

The ***vocabulary*** is not an all-inclusive list of words with which students should be familiar. Rather, it is a basic list of the terms which students will have to understand and be able to use in order to learn about the concept. Individual teachers are in the best position to determine the language needs of their students for each lesson.

The lessons, themselves, are divided into three columns:

- the ***objectives***, which are behavioural objectives students should achieve, once they have participated in the lesson;
- ***student activities***, which are suggested activities that teachers may use with their students to help them achieve the objectives. Teachers should select those activities which are most suitable for their class. They may have to adapt some for the particular students in their class. For younger grades, activities have been made as "hands on" and concrete as possible;
- the ***teacher notes***, which provide some basic information, as well as more detail for teachers on how to carry out activities.

At the end of each unit, on coloured pages, ***teacher background information*** provides more detail on specific topics.

The pages are numbered so that teachers who are looking for a particular lesson will be able to locate it easily.

Each unit has reference letters:

ME — Mental and Emotional Well-Being
GD — Growth and Development
FL — Family Life

Following the reference letter is a number which indicates the lesson number in a particular unit e.g., ME 3 means the third lesson of the Mental and Emotional Well-Being Unit for that particular grade.

The next number indicates the overall page of that unit, e.g., ME 3.12 means the third lesson of the Mental and Emotional Well-Being Unit, the twelfth page of the whole unit. So in other words, teachers can look up the regular page number of each unit, or the lesson number.

Teachers should note that one lesson in the program may take more than one class period, depending on student's previous knowledge, experience and language proficiency. Allowance has been made in the time allocation for this.

## APPROACHES TO THE TEACHING OF HEALTH

The methods which an individual teacher uses with this program are as important as the content. Since the program is designed to influence beliefs and attitudes, it is important for students to examine their own and other people's beliefs and attitudes. It is also important for students to practise, in simulated situations, the skills which they are developing, so that using these skills will become second nature to them in the real world. This involves students sharing opinions, feelings, beliefs and information. Both classroom atmosphere and methods will contribute to the success of the program.

## BUILDING A POSITIVE CLASSROOM ATMOSPHERE

The success of this program will depend on the establishment of a positive classroom atmosphere, where students and teachers feel comfortable with each other when discussing personal or sensitive issues.

A number of factors will contribute to this positive classroom atmosphere:
- an attitude of mutual respect, where "put-downs" are not acceptable;
- a non-judgemental atmosphere, where each person's opinion is valued;
- openness, honesty and trust by teacher and students;
- confidentiality, where students are not afraid that opinions or information are discussed openly outside the class.

Prior to starting the lessons, teachers should discuss with students the importance of each of these factors. Teachers should remind students of them regularly throughout the lessons.

In the Family Life Unit, students may demonstrate initial embarassment with the topic by giggling or laughing. This is often because they feel uncomfortable with discussing the topic of sexuality. These feelings will diminish:
- as they become more familiar with the subject;
- if other factors outlined above are contributing to a positive classroom atmosphere;
- if the teacher is comfortable with the subject.

## THE TEACHING OF VALUES

Health Education, and especially the Family Life component, cannot be taught without discussing values. The School Health Program uses universal values as the basis for decision-making on any health-related matter, including sexuality.

The program focuses on these values:
- a sense of caring
- respect for self, family and others
- kindness
- honesty and justice
- compassion
- non-exploitation

All units of the program encourage respect for family and cultural values, religious beliefs and the law.

Teachers are encouraged to ask groups of resource people with different points of view to present their views on controversial issues to older students. For example, a discussion on birth control may take the form of a panel discussion, where the members include people with differing opinions. This provides students with the opportunity to listen to other people's opinions, to question them and to think about the expressed opinions in a respectful atmosphere.

Teachers must be alert to the dangers of imposing their values on students. Being non-judgemental will encourage students to be more open.

## APPROPRIATE TECHNIQUES FOR TEACHING HEALTH

A number of teaching techniques are particularly appropriate for this program.

1. *Small Group Discussion*
   Dividing students up into small groups encourages free discussion. It encourages students who are reluctant to speak out in a large group to feel more comfortable, and also gives students an opportunity to learn from each other.

   Successful small group discussion depends upon:
   - encouraging students to take a risk in sharing information
   - establishing rules at the beginning of the sessions e.g.,
     - no insults or put downs
     - only one person talks at a time
     - show respect for each other's opinion
     - everyone gets a turn, but may choose to pass
   - thinking about the composition of the groups e.g.,
     - is there a competent leader?
     - is there an even mix of the sexes?
     - is there a mix of extroverted and introverted children?
   - starting to use small group discussions at a young age, so that students become used to this method of sharing
   - always concluding the activity by asking one person from each group to report its discussion to the rest of the class.

2. *Brainstorming*
   Use brainstorming to solicit ideas or opinions from the students. Gather as many opinions as possible, without making any value judgements on them. This allows for the free flow of ideas. Write the suggestions on the chalkboard or flip chart paper. After brainstorming, categorize and discuss the ideas. This is often effective in small groups.

   Five rules of brainstorming to remember are:
   - do not evaluate the ideas until after the brainstorming session;
   - quantity is more important than quality — list as many ideas as possible in a given length of time;
   - expand on the ideas of others — if someone else's idea prompts another idea, share it;
   - encourage creativity; and,
   - record all ideas.

3. *Roleplaying*
   Roleplaying is an essential element of any program which influences attitudes and behaviours. Not all teachers, or all students, feel comfortable using roleplay. However, there are some steps to follow which will increase the success of this method:
   - decide on the topic of the roleplay;
   - start by using volunteers;
   - discuss the scenario to be acted out. Help the students to understand what to look for;
   - discuss each person's part, using a hypothetical situation. Ask students how the person would feel, and what the person would say or do in that situation;
   - have the students act out the scene;
   - always finish the roleplay with a discussion about the different people in the scenario, their feelings and possible alternatives;
   - the more frequently you use roleplay as a teaching method, the more proficient the students will become and the more successful it will be; and,
   - if role play is not successful the first time, do not give up. Try again!

4. *The Question Box*
   When dealing with topics of a sensitive nature, such as those in the Family Life Unit or the Alcohol and Other Drugs Unit, students may be reluctant to ask questions publicly. Use of a question box allows students to ask questions anonymously, and facilitates discussion of a difficult topic which students wish to bring up.

   At the end of each class, or at the end of a particular session, let students know that they will be able to write down any question which they wish to ask and to put it into the question box anonymously. At the beginning of the next class, the teacher will respond to the questions in the box.

   Another effective use of the question box is to ask students at the beginning of the sessions to write down questions which they wish to have answered during the classes. This allows the teacher to structure the program around the needs of the students.

# THE LANGUAGE DEVELOPMENT APPROACH AND THE N.W.T. SCHOOL HEALTH PROGRAM

## Who Should Use the Language Development Approach

Students in the Northwest Territories come to school understanding and speaking a number of different languages. Where appropriate, where possible and where mandated by parents and/or L.E.A.'s, teachers should instruct students in Health Education classes in the language in which they are most proficient.

In some communities, students are not proficient in their first language, parents do not want instruction in the first language, or staff, programs and materials are not available to teach in the first language. In those situations, schools instruct Health Education classes in English. Because students in these communities may not be proficient in the English used to teach the curriculum, teachers of Health must take the time and make the effort to teach students the language required to talk, read and write about Health concepts. Success in the Health Education program is not otherwise possible.

The Department of Education directs the use of the Language Development Approach for students who are not proficient in English when it is the language of instruction and for students who are learning English as a Second Language. It is the responsibility of teachers at all levels to use the Language Development framework when preparing their own lessons or presenting lessons provided in the Health units.

## What is the Purpose of the Language Development Approach?

The primary purpose of the Language Development Approach is to provide students with the vocabulary and sentence patterns necessary to succeed in school and, in this program, to learn about health concepts. A related aim is to help students develop thinking skills and to use the language of instruction for a variety of purposes: to imagine, to investigate, to explain, to describe, to question, etc.

A second purpose of the approach is to help students learn the vocabulary and sentence patterns required to communicate in various social situations. It provides them with oppurtunities to learn to use additional language to satisfy needs, to regulate personal behaviour, and to establish and define social behaviour. This purpose is secondary because many students have a first language to use to fulfill these purposes.

## The Principles of the Language Development Approach

The Language Development Approach draws on elements of many traditional and contemporary practices in first and second language teaching to form the following set of principles on which to build classroom practice:

1. ***Students need to have their experiences, skills, knowledge, and, particularly, the language they bring to school identified and used as the basis for the school language program.***

   This means the Health Education Program should identify and relate new concepts to the students' past experiences, previous knowledge, and immediate environment. Studies indicate that when teaching does not relate to students' everyday lives or existing ideas, little learning takes place.

   In the cross cultural classroom of the N.W.T. and with sensitive issues such as family life, it is particularly important to determine students' ideas, family values and relevant experiences, before teaching the lessons.

2. ***Students need to learn to articulate for themselves and to communicate their thoughts, feelings, needs, opinions, and intentions for a variety of purposes in many different communication contexts. They need to be able to understand, learn from and respond to the communication of others.***

   This involves being able to:
   - express/inquire about personal needs, desires, feelings, attitudes etc.
   - socialize
   - direct the actions of the self and the actions of others
   - impart and seek factual information on past and present experiences
   - reason logically
   - make and express predictions
   - project into the experiences, feelings, and reaction of others
   - determine and express intellectual attitudes
   - evaluate

The Health program should involve students in a variety of activities which require them to use language in all these ways. Traditional paper and pencil exercises must be extended to include graphing, interviewing, reporting, researching, investigating, problem solving, etc.

3. ***Students need to learn language to communicate, but they also use language to learn. Therefore, language should be taught across the curriculum.***

The Health Education program should teach second language students the language they require to learn about new concepts. Success in Health is not possible otherwise. This may mean teachers cannot cover all concepts for all topics. It is preferable to cover some concepts for all topics rather than omitting some topics altogether.

4. ***Second language students need to spend more time learning to communicate in the language of instruction than they do learning about the language of instruction.***

The time spent in Health Education teaching students language should be devoted to introducing, practising, and applying the vocabulary and sentence patterns students require to talk, read, and write about a concept.

5. ***Students need to learn language that is meaningful. It is easiest to accomplish this when teaching language in a context. Without adequate concept development, the language students learn is either vague or devoid of meaning.***

The Health Education program should take the time to ensure that students learning new concepts have enough first hand or indirect experiences with the concepts to understand them clearly. There is no point in students studying material they don't understand. If teachers do not make the material understandable, students will supply their own meanings. These may or may not be appropriate!

6. ***Students need to learn to develop their thinking skills and to engage in more abstract levels of thoughts as they mature. They must learn the language that allows them to express their thinking about concepts. Initially, they need to learn the concrete vocabulary and functional sentence patterns which enable them to recall, match, sequence, classify, etc. Eventually they need to learn more complex sentence patterns so that they can generalize, analyze, hypothesize, imagine, predict and evaluate.***

The Health Education program for primary students should concentrate on teaching and using concrete thinking skills. The Health Education program for older students should introduce more abstract thinking skills as students can handle them.

7. ***Students need to participate in language activities that integrate the lahguage strands of listening, speaking, reading and writing. Specific skills taught will vary with the proficiency level of the students. Reading and writing activities should use language which students have internalized aurally/orally.***

The language activities in the Health Education program should include all four language strands. Students who cannot talk about a concept will have difficulty reading and writing about it.

8. ***Students need to learn "real" language and how to use it in the natural situations in which it is required.***

The language included in the Health Education program should be as close as possible to the everyday vocabulary and sentence patterns people actually use to talk or write about a concept. Students need to get into the community to use the language they are learning with people outside the classroom.

Program content, classroom organization and teaching techniques used to develop concepts and skills should:

a) reflect all the above principles
b) vary according to
  - the language proficiency of the students in the first and second language
  - cultural background (experiences, interests)
  - age/grade levels
  - type of topic
  - learning style of students
  - materials and equipment available
  - teaching style of teacher

These principles are also valid for students who speak English as a first language. The difference lies in the methods and techniques used. Although designed for second language students, the Language Development Approach allows flexibility in choosing specific classroom practices and techniques to meet the varied language needs of students.

## LANGUAGE DEVELOPMENT FRAMEWORK

The Language Development Approach uses the following framework to structure lessons involving conceptual development and language learning for any subject area or for topics of personal interest or cultural relevance.

**Intellectual Skills**

- Perceiving
- Retrieving
- Recalling
- Matching
- Sequencing
- Classifying
- Comparing/Contrasting
- Generalizing
- Inferring
- Predicting
- Interpreting
- Hypothesizing
- Imagining
- Applying
- Analyzing
- Synthesizing
- Evaluating

**Phase One: Concept Development**
**Language Exposure**
Assessment
Concept Introduction
Language Items Introduction

**Phase Two: Language Practice**
Assessment
Concept Consolidation
Language Internalization
Skills Development
  Listening
  Speaking
  Reading
  Writing

**Phase Three: Communicative Application**
Assessment
Listening and Reading
  Comprehension
Speaking and Writing
  Creative Expression

*Based on the work of Jim MacDiarmid*
*Adapted by B. Pugh and C. McGregor*

## How to Develop a Language Development Unit

1. Identify the topic of study from the Health Education program.
2. Determine the key concepts and sub-concepts for the topic. Use brainstorming, semantic mapping, or content diagramming to outline these concepts for your own reference.
3. Assess and predict what experiences, knowledge, interests and attitudes students already possess which you can relate to the concept and subconcepts of the topic through:
    - observing the activities in the community in which students engage;
    - determining previous school experiences students have had with respect to the topic;
    - talking with classroom assistants, parents, L.E.A. members, older students, etc.;
    - observing students in the classroom.
4. Determine what materials and resources are available in the school and community to teach the key concepts and sub-concepts.
5. Brainstorm techniques and activities that you can use to teach the concepts and sub-concepts of the unit. Keep in mind the cognitive maturity, proficiency level, and background experiences of the students in the class.
6. Brainstorm the language items (vocabulary and sentence patterns) that students need to know in order to understand and discuss the concepts and subconcepts of the topic.
7. Determine other language items students may need to know in order to carry out the activities.
8. Predict which language items students already know. Predict language items students have in their linguistic storehouses that you can use to introduce the concept specific language.
9. Plan an initial assessment activity that identifies which experiences, concepts and language items students already have for the topic.
10. Plan specific lessons to teach key concepts, subconcepts and associated language.
11. Plan culminating activities which provide students with opportunities to consolidate and use knowledge and language learned throughout the unit. These can be sharing sessions with other classes, parents or community members.
12. Plan activities that evaluate student progress; these should determine what they have learned from the unit in terms of concepts, attitudes, skills and language items.

### How to Plan Language Development Lessons

Plan specific lessons to teach key concepts and subconcepts using the Language Development Framework.

### Concept Development/Language Exposure Activities

Choose concept development activities that help students relate previous knowledge to the topic of study or fill gaps in that knowledge. These activities should involve direct, first-hand, active learning with concrete materials as much as possible. Where necessary, use indirect experiences (films, filmstrips, pictures, etc.) to allow students to move beyond the confines of the immediate classroom to explore concepts associated with other times and places. Plan several activities which introduce and reinforce the concepts in different ways.

While students learn about the concepts, activities should also introduce them to new language items which express the concepts. The activities should help students to associate new vocabulary with relevant objects or actions and to express the relationships among concepts with appropriate sentence patterns.

### Language Practice Activities

In this part of the lesson, students use the new language items introduced in concept development activities in a variety of activities that develop listening, speaking, reading, and writing skills. Through intensive practice of items in a variety of ways, students come to "own" the new language, i.e., commit it to memory so that it becomes part of their permanent storehouse of language items. These activities should also strengthen the bond developed between the new concepts and the language items that represent those concepts. While the whole class may participate in most of the concept development activities, it is important to group students for language practice according to their language needs and skills. During these group activities you can assess how well students are mastering new language items.

### Communicative Application

The final phase of the lesson sequence includes opportunities for students to use their acquired knowledge and language to communicate in a variety of situations. Students will demonstrate that they have understood the new concepts and can use the new language items by interacting with others. Activities should involve students in listening, speaking, reading, and writing to solve problems, bridge an information gap, share information, complete a task, develop an arts and crafts project, or share a finished product. These activities will provide students with an opportunity to explore related concepts and language, eventually coming full circle to new concept development and language exposure. While students complete these activities, the teacher can meet individually with students to assess the extent to which they have mastered the concepts and language from the lesson.

### Intellectual Skills

An essential component of the framework is the development of intellectual skills. Learning new concepts and language involves thinking skills. On the other hand, the ability to think abstractly involves conceptual and linguistic knowledge.

In the Concept Development/Language Exposure phase, plan assessment activities that establish whether or not students have basic building block concepts and language to engage in more abstract thinking about a topic. Subsequent activities can fill gaps and/or extend the students' background. The structured nature of Language Practice activities demands less high level intellectual activity. Answers are more convergent in nature; the information readily provided or available. However, Communicative Application activities should involve more divergent thinking. Students can draw on what they already have learned during the previous two phases to bridge an information gap or solve a problem.

## INITIAL ASSESSMENT ACTIVITIES

In order to help teachers assess where to start with the program, the following activities should be done before teaching each lesson. They will assist in determining:

- what students already know about the concepts and therefore where instruction should begin;
- what interests students have in the topic and therefore the direction the unit should take; and,
- what language students already have to discuss the topic and what language they require.

One of the basic principles of all good teaching is that teachers should start with the student when planning and carrying out a unit. Before beginning the unit, it is important to assess students' knowledge of and interest in the topic. Teachers should determine what students already know about the topic/concepts they intend to cover. What ideas do students already have? What misconceptions do they have which must be addressed? What gaps are there in their knowledge which require teaching certain lessons? What concepts do students know well enough so that teachers can skip the lessons which teach those concepts? What questions do they have? What relationships do they see between different aspects of the topic?

It is also important to identify what experiences students have which relate to the topic/concepts. By identifying these and building upon them in the lessons, teachers can help students relate the new ideas and information to their own lives. It is important for them to do this because it assists students to internalize new concepts. It helps students make the concepts part of the conceptual framework which they use to understand and describe their world. If they do not have concrete, firsthand experiences to relate to each concept they will have to be provided with them wherever possible.

Another use for these activities is to help teachers identify particular interests of individuals, groups of students, or the whole class. They can then include activities in the lessons which involve student interests, thereby increasing motivation for them to participate and learn. Teachers may decide to add, substitute or omit some lessons because of students' interests.

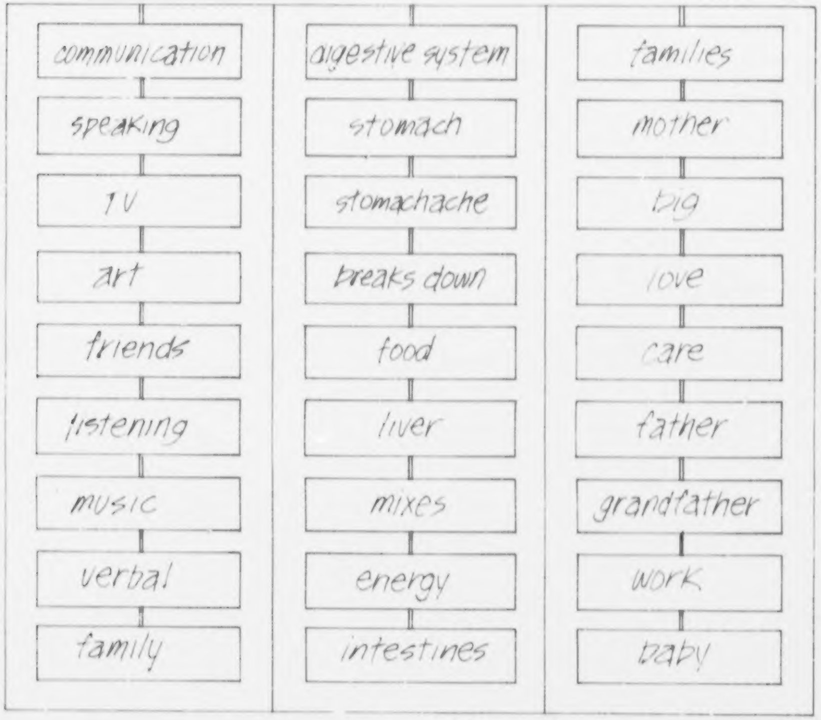
These activities will also help determine what language students have to discuss the topic, i.e., what vocabulary items students already know and what associations they have for each word. It is important to ascertain the meanings students attach to words; sometimes their interpretations may be surprising! If they do not clearly understand terms or if they use them incorrectly, it will prevent them from understanding and incorporating the concept into their mental framework.

Each unit in the School Health Program has a number of different themes. Teachers should select assessment activities suitable for that particular theme. The examples are for themes from each unit: Mental and Emotional Well-Being, Growth and Development and Family Life.

### 1. *Brainstorming*

| Mental and Emotional Well-Being | Growth and Development | Family Life |
|---|---|---|
| **Communication**<br>Ask students: "What do you know about communication?" | **The Digestive System**<br>Ask students: "What do you know about the digestive system?" | **Families**<br>Ask students: "What do you know about families?" |

Answers can be recorded on cards and hung on masking tape strips (sticky surface up) which can then be fastened to the wall or the chalkboard.


communication
speaking
TV
art
friends
listening
music
verbal
family
digestive system
stomach
stomachache
breaks down
food
liver
mixes
energy
intestines
families
mother
big
love
care
father
grandfather
work
baby

If students have difficulty with this activity you may wish to direct their thinking or prompt ideas by asking more specific questions:

| | | |
|---|---|---|
| Why do we communicate? | What body parts are part of the digestive system? | What kinds of families are there? |
| How do we communicate? | What do they do? | How are families alike? |
| With whom do we communicate? | Where are they found? | How are families different? |
| | How do we take care of them? | Who are in families? |
| | | What do families do? |

Encourage students to predict answers to these questions even if they are not sure of the exact responses. It might be interesting to record their predictions separately and compare them to the actual answers as they study the unit. Students may think of their own questions as well. Teachers can keep a list of all the questions the class cannot answer to focus the lessons they teach during the unit.

After recording their responses on the cards, teachers should have students chant the words with them and talk about the words:

- Which word is the most interesting?
  - the least interesting?
  - the most puzzling?
- What other word can you think of that means almost the same thing?
- What comes to your mind when I say _________?
- What do you think this word means? Etc.

## 2 *Categorizing*

Teachers can distribute the word cards from the brainstorming sessions ensuring that they tell students the words they give them. Younger students should receive only one card at a time so they will not get confused. One student places his/her word card at the top of one of the masking tape strips and tells the word to the class. Teachers ask if there is anyone else who has a word that belongs with the first word and have another student place his/her word card under the first, read the word and explain why it belongs with the first word. The class can give a title to these two cards which now form a category. Teachers can then ask if anyone can start a new category. When students have placed all of the brainstormed words in categories, the class can discuss the titles and change them if necessary. Students can then chant the words in each category. Teachers can transfer the words to a flowchart to provide a permanent reference.

| Communication | The Digestive System | Families |
|---|---|---|
| **Different ways of communicating** | **Body parts** | **Who is in them?** |
| verbal<br>non-verbal<br>speaking<br>listening<br>music<br>art | stomach<br>intestines<br>liver<br>mouth<br>esophagus | mother<br>father<br>baby<br>grandmother |
| **With whom** | **What they do** | **What do they do?** |
| friends<br>family<br>teacher<br>people at work | squeeze<br>mix<br>break down<br>move | play<br>work<br>love<br>care |
| **Kinds of communication** | **Problems** | **What size are they?** |
| aggressive<br>assertive<br>passive | stomach ache<br>nausea<br>diarrhea | big<br>small |

As teachers progress through the unit they may wish to add new information to the chart. They may also identify new questions and hopefully, the answers. At the end of the unit they can review the chart with students and keep it as a reference for future use.

## SAMPLE QUESTIONS:

Teachers can use these questions during the initial assessment activity to determine what experiences, interests, language, and knowledge students have about the topic. They can also use the questions during discussions in the lessons for evaluation.

### Questions for Assessing Experience:

1. Have you been in a situation where ________________?
2. What do you know about ________________?
3. Have you ever seen _____ ____________?
4. Have you ever experienced ________________?
5. Have you ever been ________________?
6. Have you ever done ________________?
7. Has something like this ever happened to you?
8. When was the last time you ________________?

### Questions for Assessing Language:

1. What do you think these words mean?
2. Can you give me another word that means ________________?
3. What comes to your mind when I say ________________?
4. Have you heard of the word(s) ________________?
5. What words can you think of when I say the word ________________?

### Questions for Assessing Thinking Processes:

*Cognitive Memory* (details, information)

1. Who ________________?
2. What are the facts?
3. What are the most important details?
4. What is the ________________?
5. What do you mean by ________________?
6. What is your interpretation of what happened? (What do you think happened?)
7. When?
8. Where?

*Convergent/Generalization* (getting the main idea)

1. What are the chief points?
2. Given that information, what is the main idea?
3. What is the single most important idea?
4. State the idea in one sentence.
5. Explain ________________.

*Structuring/Relating* (arranging relationships)

1. Categories:
   Which group does that belong to?
   How would you classify ________________?
   What type would you ________________?
2. Comparisons: How are they alike? same? similar? identical?
3. Contrasts: How is it different? in opposition to? unlike?
4. Cause and Effect: What will happen if? Why?
   What will happen as a result of?

*Divergent/Using/Applying*

1. What might happen if ________________?
2. If you use that idea, what would it mean for ________________?
3. Apply that idea to our (this) situation.
4. What would result if ________________?
5. If you were given these facts, what would you do to ________________?
6. How would it be different if we used this idea?
7. What could the advantages/benefits be if we applied this idea/process?

*Evaluation/Judging/Valuing*

1. How do you feel about this idea?
2. What is your opinion?
3. What is the best ________________?
4. Are you satisfied with that answer/plan?
5. Can this statement be made? Why?
6. Out of all the information, what can be used to prove your point?
7. How would you judge?
8. What is your opinion or conclusion about the product/plan/idea?
9. Why did you think it worked/didn't work?
10. What is fact? What is opinion?

## EVALUATION

Educators often use the word "evaluation" to mean "testing". Evaluation, however, is an integral part of all educational programs or processes. It includes any form of obtaining information about what students are learning and how effective the program is in achieving its goals.

We learn a great deal from effective evaluation, including:
- what concepts, skills and attitudes a student has learned;
- if a student has achieved the objectives;
- in which areas of the program a student is proficient;
- a student's grade level;
- if the program needs to be reviewed, revised or modified;
- if teaching methods are effective;
- if a student needs additional assistance;
- if a student considers the lessons relevant i.e., do the lessons relate to the world of the student outside the classroom?

## EFFECTIVE EVALUATION

For effective evaluation, it is important:
- to link the evaluation to the stated objectives of the program;
- to include as many forms of evaluation as possible;
- to assess students in the cognitive, affective and psycho-motor domains; (in the Health Program, the affective domain is particularly important);
- to ensure that the forms of evaluation are appropriate to the student's developmental level and language proficiency and that they are culturally suitable;
- to ensure that the method of evaluation supports and reinforces goals of the program i.e., if one of the goals of the program is to enhance self-esteem, then the evaluation must include successful experiences which will contribute to that;
- to encourage students to take some responsibility for evaluation.

## DIFFERENT APPROACHES TO EVALUATION

It is not possible in this document to include all the possible approaches to evaluation or the detailed information necessary for teachers to use each approach effectively. A more comprehensive effort will be made to address evaluation for this program at a later date.

The approaches included will give teachers some general guidelines on evaluation.

1. *Pre-tests and Post-tests*

In order for teachers to assess what students already know about a topic, and to determine the starting point for the lessons, it may be necessary to administer a pre-test. This pre-test should include items which assess skills, attitudes and behaviours, as well as specific knowledge.

By using the same test or a parallel test after teaching the lessons, teachers will be able to assess what knowledge students have acquired and any possible changes in individual attitudes and behaviours, e.g.,

| | True | False |
|---|---|---|
| i) **Knowledge** | | |
| Tobacco contains a drug. | ( ) | ( ) |

ii) **Skills**
John's friends want him to skip school. Use the decision-making process to show how he decides what he will do.

iii) **Attitude/Beliefs**
Daily exercise is important to me.

Agree ( )
Not Sure ( )
Disagree ( )

iv) **Behaviours**
I would eat candy or chips for a snack.

Most of the time ( )
Some of the time ( )
Never ( )

### 2. *Projects*

Projects are assignments given to individual students or to a small group of students. Usually they involve research on a specific topic within the program.

Projects allow students some freedom to express individuality and to demonstrate particular strengths.

A variety of activities can be incorporated into a project, e.g.,

- written report
- diagrams
- audio-visual material
- photographs
- models
- drama
- drawings
- graphs

It is important to structure the project carefully, and define the requirements clearly to ensure that it is manageable. Requirements should indicate

- the objectives of the project;
- completion date;
- how the teacher will evaluate it;
- where to find information.

For example, a project on the "Health Care Worker in the Community" may include:

- a description of what the health care worker does.
- a photograph of the health care worker;
- a recorded interview with the health care worker and/or with community people who have regular contact with the health care worker;
- a video of the health care worker at work;
- a graph to show how much time the health care worker allocates to different tasks;
- telephone numbers;
- a map to show how to go to the health care worker's place of work; and,
- drawings of any special tools/instruments which the health care worker uses.

### 3. *Simulations*

The Health Education program provides for the acquisition of specific skills and knowledge, and gives the students opportunities to practise appropriate attitudes and behaviours. As a result, simulations are an appropriate way to determine student progress. Discussions of alternative solutions after roleplaying also provides an indication of student attitudes.

If students have learned different ways to resist peer pressure, they can demonstrate how to resist peer pressure in a given situation, e.g.,

> Bill wants Mary to go to a party with him on Saturday. Mary's mother says she is too young to go to parties. Bill has told Mary he won't be her friend if she doesn't come.

Demonstrate how Mary resists the pressure from Bill.

### 4. *Observation*

We expect students' behaviour to reflect what they have learned so direct observation of students is an important method of evaluation. Students may not demonstrate some of the practices in the classroom, however, and so this observation must also occur in the community. Where and when appropriate, observation should include aspects of mental, physical, social activity, as well as intellectual practices of the student, e.g.,

> If students have been discussing practices which promote safety in the playground, the teacher can observe students at play at recess to determine if they demonstrate use of safe practices outside the classroom.

### 5. *Checklist*

These are a simple method of recording observations usually made in the classroom. Checklists will not necessarily give a teacher information on a student's behaviour. Teachers can develop checklists for evaluating simulations, observations, discussions, etc.

E.g.,

**Checklist for Group Discussions**

| | All of the time | Some of the time | Never |
|---|---|---|---|
| - listens without interrupting | (  ) | (  ) | (  ) |
| - shows respect for other people's opinions | (  ) | (  ) | (  ) |
| - participates readily | (  ) | (  ) | (  ) |
| - responds positively when questioned | (  ) | (  ) | (  ) |
| - questions others | (  ) | (  ) | (  ) |
| - etc. | | | |

### 6. *Anecdotal Record*

Anecdotal records are brief comments on the teacher's observations. The information recorded is factual and non-judgemental — the evaluation of what was seen is noted after the observation is complete. The comments should be specific and related to the objectives of the program. Record both positive and negative examples, e.g.,

> At recess, Sarah helped Margaret to come down from the climbing bars. She pushed James when he tried to help too.

### 7. *Self-Evaluation*

Students should also participate in the evaluation process by identifying what they learned from the lessons, what they are interested in, what they think is important for them to know more about, etc. One way of doing this is through a rating scale, e.g., I learned:

|________________________|________________________|

a lot some things nothing

I was most interested in: ______________________

I would like to learn more about ______________________

______________________

______________________

______________________

### 8. *Student Notebooks*

By asking students to keep a health notebook, teachers can assess how well students understand concepts. It is important, however, to treat the notebooks with confidentiality. Students should be aware before they write in the notebook that the teacher will look at them. In particularly sensitive areas, such as Family Life, students may be reluctant to share notebooks with teachers, if not advised in advance.

NORTHWEST TERRITORIES

# School Health Program

## GRADE 1

Northwest Territories Education
Health

March, 1991

## MENTAL AND EMOTIONAL WELL BEING

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES<br>Students will be able to: |
|---|---|---|---|
| INTRO. | | Everyone can maintain and improve personal health at school | i) identify positive practices that maintain and improve health at school<br>ii) demonstrate practices that maintain and improve health at school |
| 1 | SELF-AWARENESS | Everyone has physical characteristics | i) describe some physical characteristics |
| 2 | SELF-AWARENESS | Everyone has different abilities | i) identify things they can do well |
| 3 | SELF-AWARENESS | Everyone has different likes and dislikes | i) identify some of their likes and dislikes<br>ii) identify that people have different likes and dislikes |
| 4 | RELATION-SHIPS | Working and playing together help build relationships | i) identify ways people work and play together<br>ii) describe the importance of working and playing together |
| 5 | RELATION-SHIPS | Helping others helps build relationships | i) identify ways people help each other<br>ii) describe the importance of helping |
| 6 | RELATION-SHIPS | Sharing helps build relationships | i) identify things people share with each other<br>ii) describe the importance of sharing |

## GROWTH & DEVELOPMENT

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES<br>Students will be able to: |
|---|---|---|---|
| REVIEW | BODY SYSTEMS | Sensory organs help people learn about the environment and are important for health | i) name and locate the sensory organs of the body<br>ii) explain what the sensory organs do |
| 1 | BODY SYSTEMS | The sense of touch helps people learn about the environment and is important for health | i) locate the body parts most sensitive to touch<br>ii) describe the importance of touch<br>iii) identify positive health habits related to the sense of touch |
| 2 | BODY SYSTEMS | The sense of taste helps people learn about the environment and is important for health | i) locate the body parts responsible for taste<br>ii) describe the importance of taste<br>iii) identify positive health habits related to the sense of taste |
| 3 | BODY SYSTEMS | The sense of smell helps people learn about the environment and is important for health | i) locate the body parts responsible for smell<br>ii) describe the importance of smell<br>iii) identify positive health habits related to the sense of smell |
| 4 | DISEASE PREVENTION | The body has ways of showing sickness | i) identify common signs of sickness |

## GROWTH & DEVELOPMENT

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 5 | DISEASE PREVENTION | Diseases are spread in many ways | i) state that germs may cause disease<br>ii) identify ways that diseases spread |
| 6 | DISEASE PREVENTION | The spread of diseases can be prevented | i) identify ways to prevent the spread of disease |

**NUTRITION**

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 1 | FOOD IDENTIFICATION | Plants provide people with a variety of food | i) give examples of foods that come from plants |
| 2 | FOOD IDENTIFICATION | Animals provide people with a variety of food | i) give examples of foods that come from animals |
| 3 | FOOD CLASSIFICATION | Foods are classified into four food groups | i) name the four food groups<br>ii) identify a variety of foods that belong to each food group |
| 4 | FOOD CLASSIFICATION | Foods are classified into four food groups | i) match each food group to its colour code<br>ii) identify foods that do not belong to any food group |
| 5 | FOOD SELECTION | A variety of foods from each food group is needed daily | i) give examples of nutritious foods from each food group<br>ii) give examples of nutritious snacks<br>iii) explain why it is important to eat a variety of foods from each food group daily |
| 6 | FOOD SELECTION | A variety of foods from each food group is needed daily | i) describe a healthy way to start the day<br>ii) select nutritious foods to start the day |
| 7 | FOOD APPRECIATION | A willingness to select familiar and unfamiliar foods promotes food appreciation | i) prepare nutritious foods to start the day<br>ii) demonstrate a willingness to taste nutritious food to start the day<br>iii) state the importance of nutritious food to start the day |

## DENTAL HEALTH

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 1 | STRUCTURE AND FUNCTION | People develop two sets of teeth in their lifetime | i) identify primary and permanent teeth |
| 2 | STRUCTURE AND FUNCTION | Teeth have many functions | i) describe the functions of the teeth |
| 3 | ORAL HYGIENE | Regular use of oral hygiene skills promotes dental health | i) demonstrate effective toothbrushing skills<br>ii) practise effective toothbrushing skills<br>iii) explain the importance of caring properly for the teeth |
| 4 | FACTORS AFFECTING DENTAL HEALTH | The food which people eat affects their dental health | i) give examples of dentally safe and dentally unsafe food |
| 5 | FACTORS AFFECTING DENTAL HEALTH | Positive behaviours near hazards can prevent dental injuries | i) identify dentally safe and dentally unsafe behaviours near hazards |
| 6 | DENTAL DISEASE | Many factors contribute to dental disease | i) explain that a tooth can decay<br>ii) identify factors that contribute to tooth decay<br>iii) identify preventive behaviours related to tooth decay |
| 7 | DENTAL SERVICES AND PRODUCTS | Dental health workers are important in dental health care | i) identify local dental health workers |

**FAMILY LIFE**

GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 1 | FAMILIES | Each family has different members | i) identify family members with whom they live |
| 2 | FAMILIES | Each family has different members | i) identify extended family members |
| 3 | FAMILIES | There are similarities and differences in family structures | i) identify similarities and differences in family structures<br>ii) identify male/female members of families |
| 4 | HUMAN DEVELOPMENT AND REPRODUCTION | The body has many parts | i) name the external body parts that differ between boys and girls |
| 5 | ABUSE PREVENTION | Touch produces different feelings | i) identify the feelings associated with touch<br>ii) state rules to follow in various situations |
| 6 | ABUSE PREVENTION | Personal safety behaviours may require family and community support | i) identify family and community support people |

## SAFETY AND FIRST AID

### GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 1 | PERSONAL SAFETY | Personal safety involves following safety rules and knowing personal identity facts and community helpers | i) state personal safety rules<br>ii) state personal identity facts<br>iii) identify community safety helpers |
| 2 | PERSONAL SAFETY | Personal safety involves knowing emergency telephone numbers and how to place an emergency telephone call | i) identify emergency symbols and telephone numbers in the telephone book<br>ii) demonstrate how to place a simulated phone call to a community helper |
| 3 | ACCIDENT PREVENTION | Injuries from burns, scalds and falls can be prevented by following safety rules | i) name common injuries to children<br>ii) identify safety rules to prevent burns and scalds<br>iii) identify safety rules to prevent falls |
| 4 | FIRST AID | Minor injuries can be correctly treated by children | i) demonstrate first aid for minor cuts and scrapes |

## ALCOHOL AND OTHER DRUGS

### GRADE 1

| LESSON NO. | THEME | CONCEPT | OBJECTIVES |
|---|---|---|---|
| | | | Students will be able to: |
| 1 | SAFETY | A poison is anything which is unsafe to taste, eat or drink | i) identify some poisonous substances<br>ii) identify the poison warning sign<br>iii) explain that not all poisons have poison warning signs |
| 2 | SAFETY | Some substances are unsafe to smell | i) explain that some smells may make people sick<br>ii) identify substances which are OK/not OK to smell |
| 3 | SAFETY | Children should ask an adult they trust before tasting any unknown substance | i) explain that not all poisons have a poison warning sign<br>ii) explain why they should ask an adult they trust before tasting any unknown substance |
| 4 | DRUGS | Medicine may be helpful, but may also be harmful | i) explain that medicine may help a person who is ill<br>ii) explain why they should ask an adult they trust before taking any medicine<br>iii) identify safe methods of storing medicine |
| 5 | SAFETY | Medicine may be helpful, but may also be harmful | i) explain that candy and pills often look alike<br>ii) explain that medicine may be harmful if not used safely<br>iii) explain why they should ask an adult they trust before tasting any unknown substance |
| 6 | SAFETY | Children should ask an adult they trust before tasting any unknown substance | i) explain why some substances cannot be identified by sight or smell<br>ii) explain why they should ask an adult they trust before tasting any unknown substance |

# GRADE 1

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# MENTAL AND EMOTIONAL WELL-BEING

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**MENTAL AND EMOTIONAL WELL BEING**

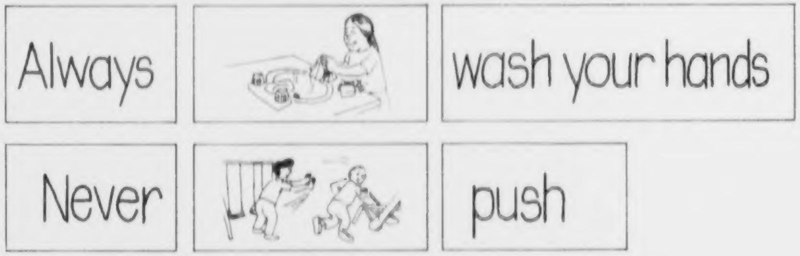
GRADE: 1 LESSON: INTRODUCTION TO SCHOOL HEALTH PROGRAM THEME:

CONCEPT: EVERYONE CAN MAINTAIN AND IMPROVE PERSONAL HEALTH AT SCHOOL

PREPARATION:
1. Props/pictures demonstrating positive health practices
2. Pocket chart and sentence strips
3. Prepare a class set of Keeping Healthy worksheet (Activity Sheet ME8)
4. "This Is The Way We ..." song (Activity Sheet ME9)

VOCABULARY: healthy, unhealthy

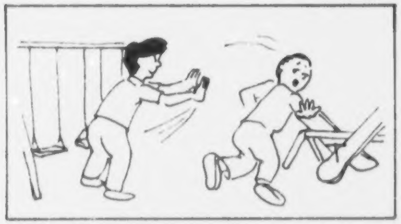
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | This is a review of Kindergarten, Introduction. |
| i) identify positive practices that maintain and improve health at school | 1. Wash hands with soap and water and tell why people wash their hands. | Have all students wash their hands with soap and water and ask them why people do this. Students will probably respond that they wash their hands:<br>- because they are dirty<br>- to make them clean<br>Teachers will have to lead students to the conclusion that it helps to keep them healthy. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 2. Identify other things they can do to keep themselves healthy at school. | Show props or pictures to help students name positive health practices. Make an experience chart to record responses. At the top of the chart write the sentence pattern:<br>We can keep healthy at school by _________.<br>- washing hands before eating<br>- washing hands after going to the bathroom<br>- using a tissue to cough or sneeze<br>- dressing properly for the weather<br>- tidying up toys so people don't fall<br>- not pushing<br>- carrying sharp things, like scissors, point down<br>- doing exercises<br>- playing outside in fresh air<br>- having fun with friends<br>- putting garbage in the garbage can |
| | 3. Establish some rules for the classroom/ school/playground. | Ask students what rules they should have to help keep themselves healthy at school. Use a pocket chart as illustrated.<br> |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 4. Complete the Keeping Healthy worksheet. | Refer to Activity Sheet ME8.<br>Have students put a cross through practices which do not help maintain health and a check mark on practices which maintain health. They can then cut out each one, and sort into healthy and unhealthy practices. |
| ii) demonstrate practices that maintain and improve health at school | 5. Learn "This Is The Way We ..." song. | Refer to Activity Sheet ME9.<br>Have students sing the song in a circle and do appropriate actions for each verse. A variation is to distribute props from Student Activity 2. The student with the appropriate prop for each verse steps to the middle of circle to demonstrate. |

# KEEPING HEALTHY

Put a cross (x) on things which are unhealthy. Put a check mark (✓) on things which are healthy. Cut each out. Sort into healthy and unhealthy groups.



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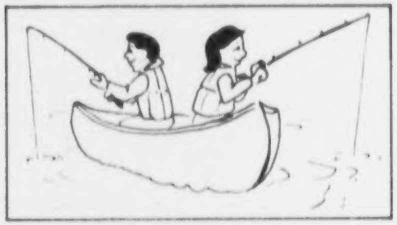

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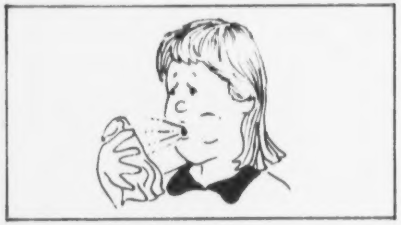

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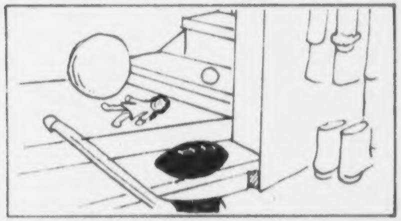

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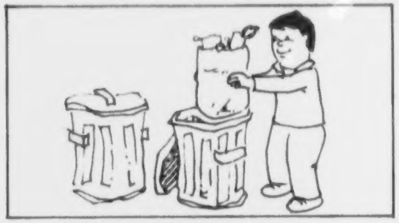

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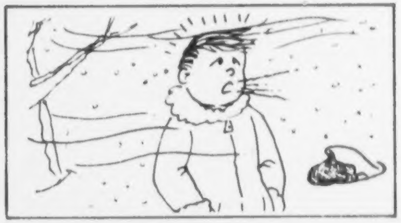

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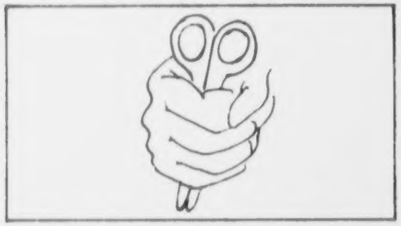

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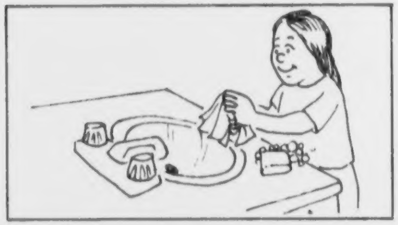

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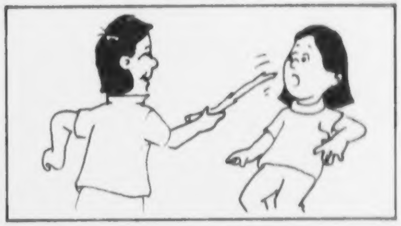

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# THIS IS THE WAY....

1. This is the way we wash our hands,
Wash our hands, wash our hands.
This is the way we wash our hands,
To keep us healthy at school.

2. This is the way we cover our nose....

3. This is the way we dress for winter....
(Pretend to put on hat and mitts.)

4. This is the way we pick up the toys....

5. This is the way we carry scissors....

6. This is the way we throw out garbage....

7. This is the way we all keep fit....

8. This is the way we play together....
(Join hands and skip round in a circle.)

**MENTAL AND EMOTIONAL WELL BEING**

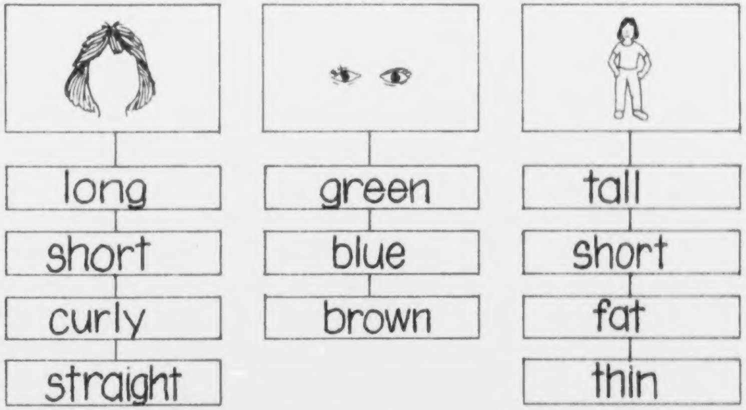
GRADE: 1 LESSON: 1 THEME: SELF AWARENESS

CONCEPT: EVERYONE HAS PHYSICAL CHARACTERISTICS

PREPARATION:
1. Silhouettes of well known characters (e.g., Big Bird), overhead projector, sheet
2. Pocket chart and prepared cards for Student Activity 3
3. Materials for mobiles
4. "In The Mirror I Can See" and "I Like Me" poems (Activity Sheet ME10)
5. Blindfolds

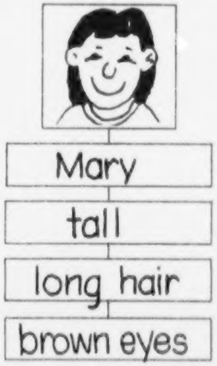
VOCABULARY: hair, eyes, nose, mouth, ears, fat, thin, tall, short, and descriptive words

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | The next three lessons relate to Social Studies, Grade 1, Topic B: I'm The Only One Like Me. Teachers may wish to combine Social Studies and Health to teach these concepts. |
| i) describe some physical characteristics | 1. Identify silhouettes of well known characters. | To create a silhouette, shine an overhead projector on a cut out shape, so that it casts a shadow on the sheet. Teachers should select characters which students will recognize. They might include:<br>- Miss Piggy - an elder<br>- Big Bird - a student<br>- Mickey Mouse - your classroom assistant |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 2. State how they knew who the silhouettes were. | Ask students how they were able to identify the silhouettes. Emphasize that we usually recognize people by their physical characteristics, including:<br>- hair - nose<br>- eyes - ears<br>- mouth<br>- shape (fat, thin, etc.) |
| | 3. Describe some of their own physical characteristics. | Prepare cards which describe specific physical characteristics.<br><br>Review the meaning of each (word) card with students. |

long
short
curly
straight
green
blue
brown
tall
short
fat
thin

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Ask students to describe one of their own physical characteristics. Use a pocket chart and the cards to record student responses with the sentence patterns as illustrated.<br>I \| have \| green \| eyes<br>John \| has \| brown \| eyes<br>I \| am \| tall<br>John \| is \| short |
| | 4. Learn the poem "In The Mirror I Can See." | Refer to Activity Sheet ME10. |
| | 5. Identify other students by feeling their features. | Divide students into groups of five or six. Blindfold one student who must then try to identify other students by feeling their hair, face, clothes. Have students state how they were able to identify other students using the sentence pattern:<br>I knew it was (Julie) because of (her curly hair). |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 6. Make a "Me" mobile. | Have students draw and cut out a face and write their name on a card. Then choose three physical characteristics and write each of them on a separate card. Make into a mobile.<br><br> |
|  | 7. Learn the poem "I Like Me." | Refer to Activity Sheet ME10. |

# IN THE MIRROR I CAN SEE

In the mirror I can see
A round, round face looking at me!
Two brown eyes and a nose has he/she.
I wonder who that person can be?

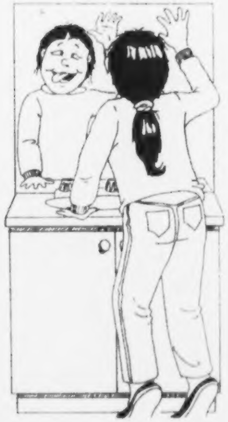
In the mirror I can see
A tall thin girl (boy) looking at me!
Two arms, two legs and a head has he/she.
I wonder who that person can be!

Adapted by: Heather Nolsoe
Cathy McGregor
Helen Balanoff
Barbara Hall

# I LIKE ME

I like me. I like me.
No one else looks just like me!
I am tall; I am thin.
I have a big nose
And a little chin.
My eyes are brown
And my face is round.
I like me. I like me.
No one else looks just like me!

Adapted by: Helen Balanoff



**MENTAL AND EMOTIONAL WELL BEING**

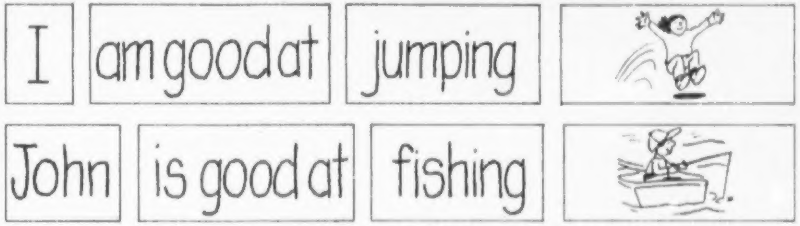
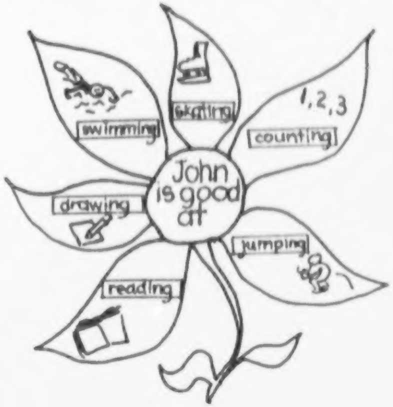
GRADE: 1 LESSON: 2 THEME: SELF AWARENESS

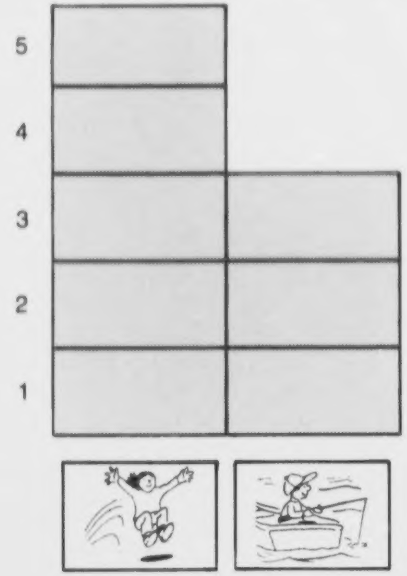
CONCEPT: EVERYONE HAS DIFFERENT ABILITIES

PREPARATION:
1. Pocket chart and sentence strips
2. Materials for fabulous flowers for Student Activity 3
3. One button for each student
4. "I Am Me" poem (Activity Sheet ME11)

VOCABULARY: good at, vocabulary as required for students' abilities

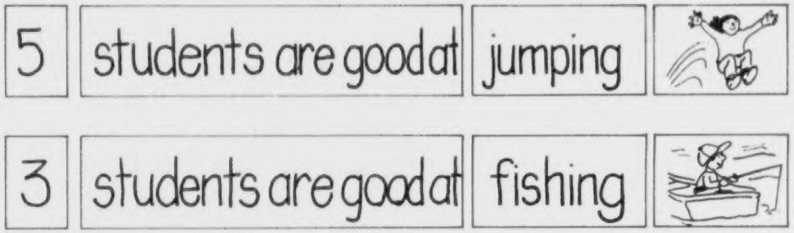
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify things they can do well | 1. Demonstrate something they can do well. | Introduce the lesson by asking students, "Who is good at jumping?" Ask a volunteer to demonstrate his/her ability. Have class clap to demonstrate their appreciation of the person's ability.<br>Ask other students to demonstrate something they are good at doing. Have class clap as each person demonstrates. Use a pocket chart to record abilities with the sentence pattern as illustrated. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | |  I<br>am good at<br>jumping<br>John<br>is good at<br>fishing |
| | 2. Learn the poem "I Am Me." | Refer to Activity Sheet ME11. |
| | 3. Make "fabulous flowers" for themselves. | Give each student a center for his/her flower. On the petals have students cut out or draw pictures of things they are good at doing. (Make six petals for each student.)<br> John is good at<br>swimming<br>skating<br>1,2,3<br>counting<br>drawing<br>jumping<br>reading<br>Display completed flowers on the bulletin board. |

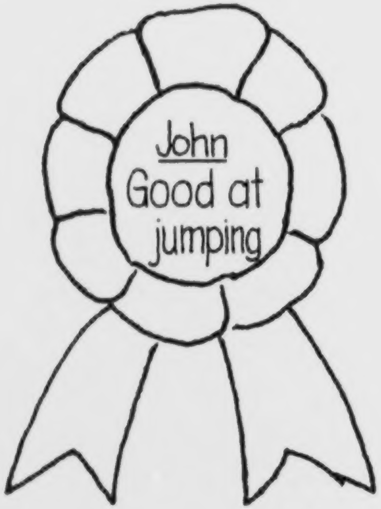
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Identify things that other students can do well. | Emphasize that everyone is good at something. Ask students to name something that a student other than themselves is good at doing. Students respond using the sentence pattern:<br>(Jonah) is good at (skipping).<br>Ask students to name other students who are good at skipping (using the same sentence pattern.) |
|  | 5. Graph the class results of things they can do well. | Keep count of the number of students identified and record these on a bar graph.<br> |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|

Use a pocket chart to summarize the results of the graph.


5
students are good at
jumping
3
students are good at
fishing

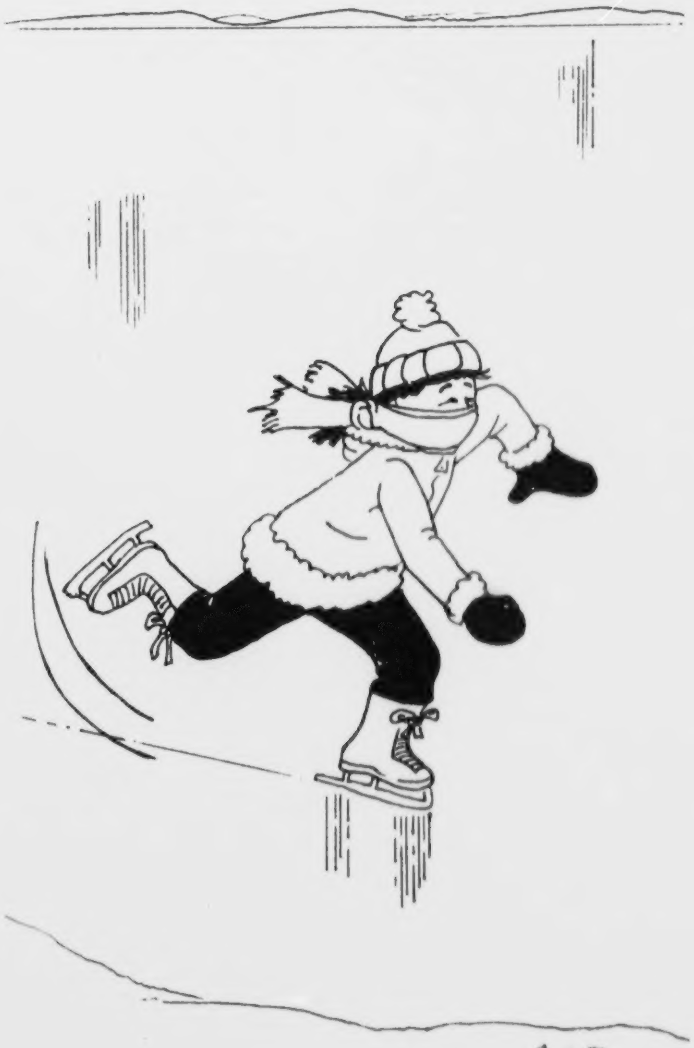
Make one button for each student, indicating something that person can do well, e.g., Good at Jumping.


John
Good at
jumping

# I AM ME

Oh, I can sing,
And I can walk,
And I can skate
And slide and talk-
And I can count
To twenty three.
How glad I am
That I am me!

Adapted by: Helen Balanoff
Barbara Hall



**MENTAL AND EMOTIONAL WELL BEING**

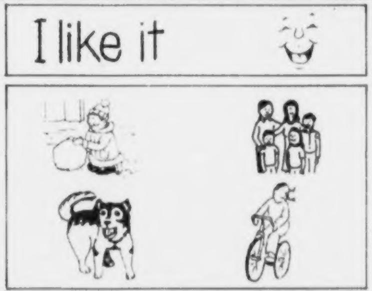
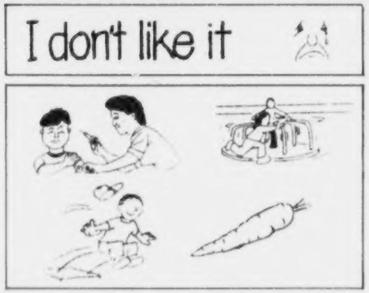
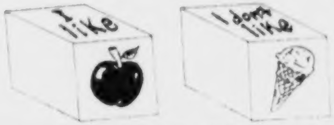
GRADE: 1 LESSON: 3 THEME: SELF AWARENESS

CONCEPT: EVERYONE HAS DIFFERENT LIKES AND DISLIKES

PREPARATION:
1. Prepare a class set of Things I Like/Don't Like worksheet (Activity Sheet ME12)
2. A number of pictures of things that people might like or dislike for Student Activity 2
3. Pocket chart
4. Prepare two class sets of outlines for picture cubes(Activity Sheets ME13A & ME13B)

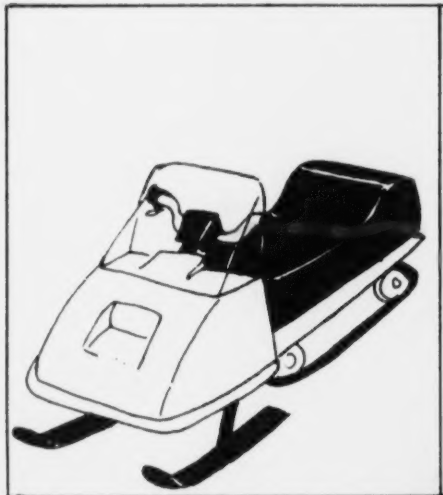
VOCABULARY: like, don't like

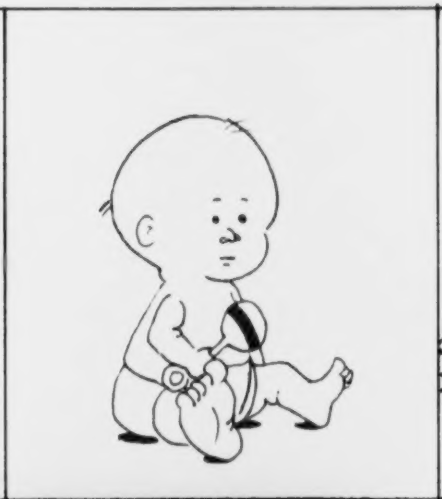
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify some of their likes and dislikes | 1. Identify things they like and things they don't like. | Refer to Activity Sheet ME12.<br>Have students cut out each picture on the worksheet and sort them into two piles: Things I Like/Things I Don't Like. |
| ii) identify that people have different likes and dislikes | 2. Identify differences of opinion regarding likes and dislikes. | Give each student a picture. Ask them if they like it, or don't like it. Place it on the appropriate side of a pocket chart, as illustrated. |

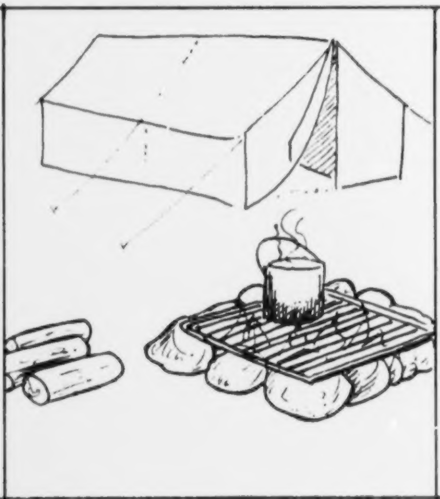
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | |   <br>Pictures might include:<br>- foods (e.g., carrots, chocolate)<br>- activities (e.g., hockey, watching T.V.)<br>- objects (e.g., ski-doo, cigarettes)<br>- animals (e.g., caribou)<br>- places (e.g., city, beach)<br><br>Ask students if any of them would like to change things from the "I Like" to the "I Don't Like" side. Let students take turns making changes to demonstrate that people like different things. Discuss reasons for changes. |
| | 3. Cut out pictures of things they like and don't like and stick them on the different faces of picture cubes. | Refer to Activity Sheets ME13A and ME13B.<br><br>These two sheets fit together at the dotted lines to form one pattern. Prepare two cube patterns for each student. Have students make one cube for things they like, and another for things they don't like.<br> |

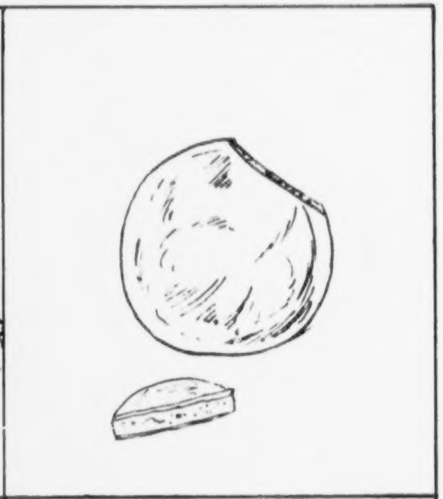
ME12

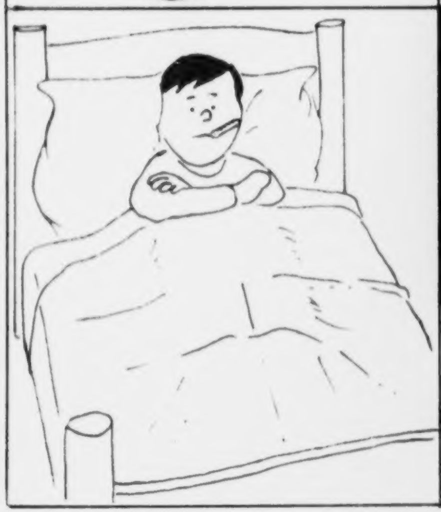
# THINGS I LIKE/DON'T LIKE

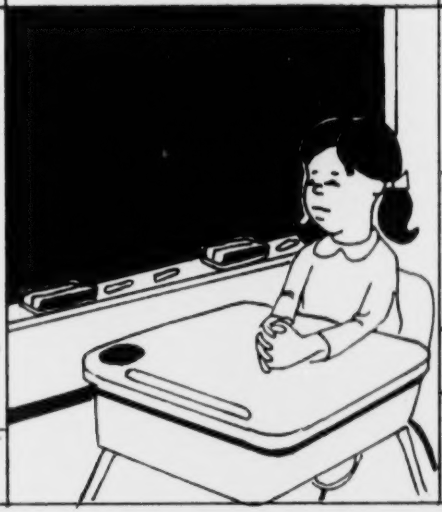


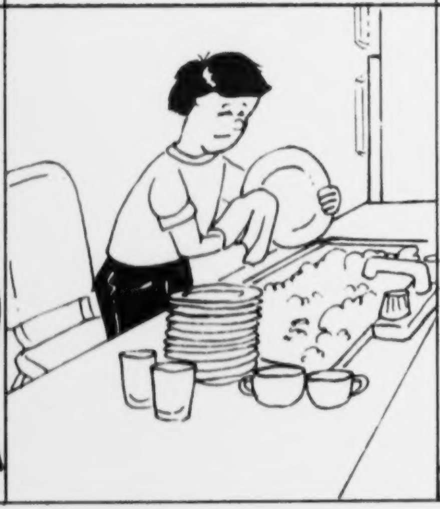


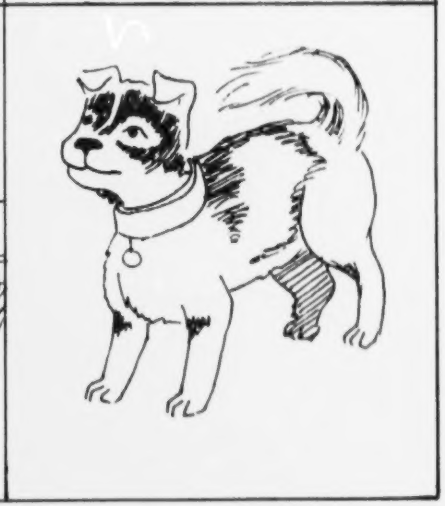




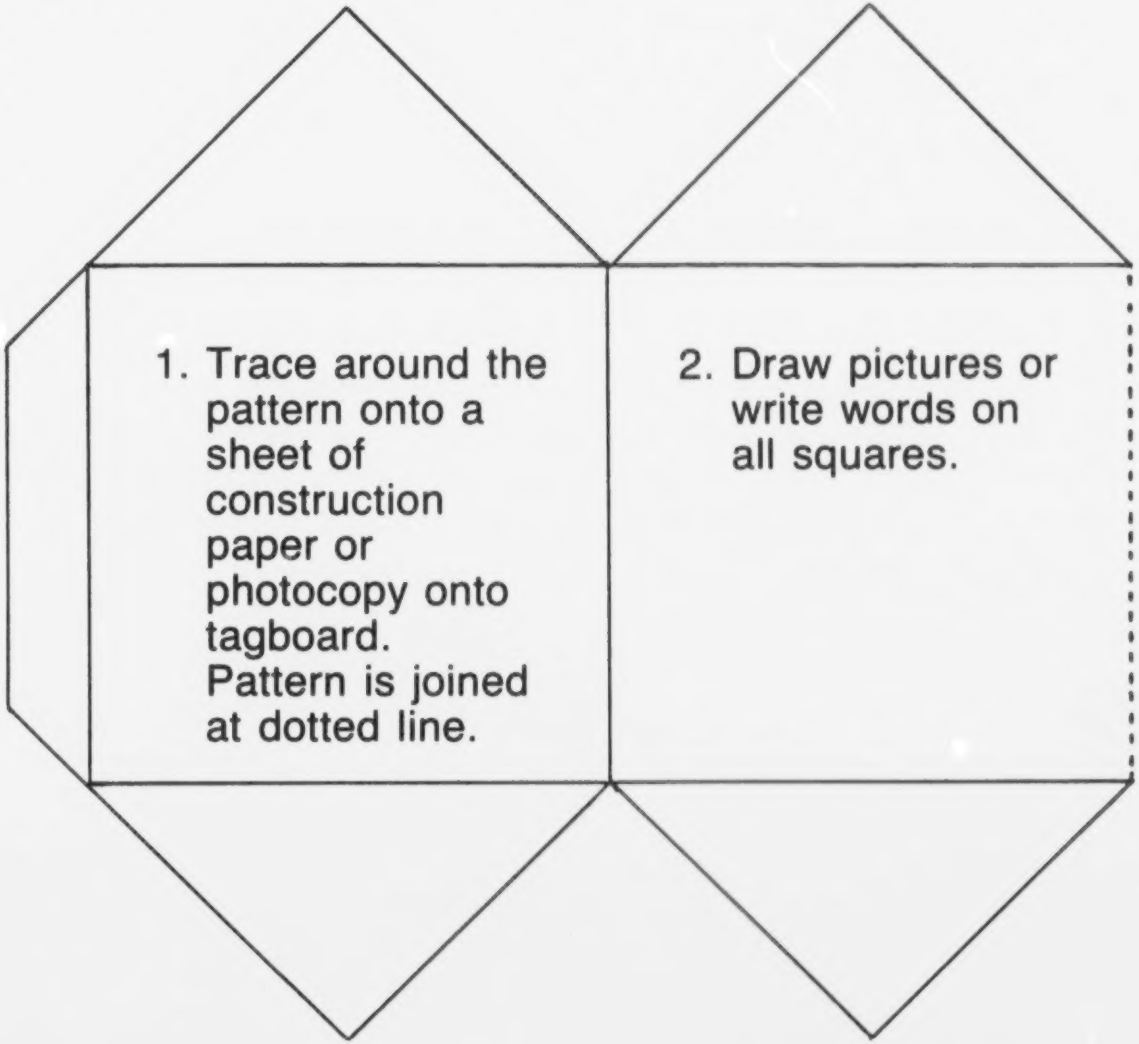








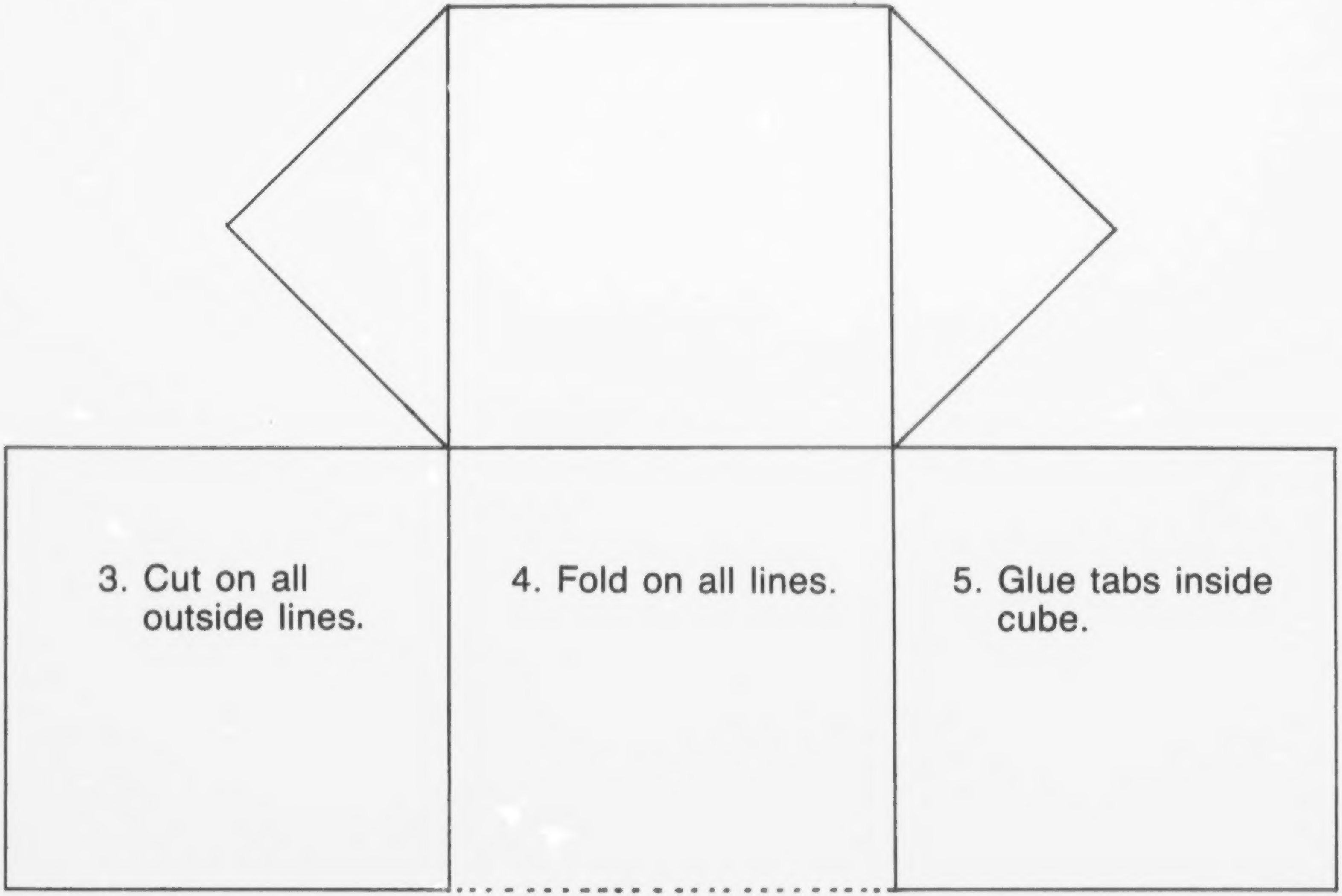
ME13A



1. Trace around the pattern onto a sheet of construction paper or photocopy onto tagboard. Pattern is joined at dotted line.

2. Draw pictures or write words on all squares.

ME13B



3. Cut on all outside lines.
4. Fold on all lines.
5. Glue tabs inside cube.

**MENTAL AND EMOTIONAL WELL BEING**

GRADE: 1 LESSON: 4 THEME: RELATIONSHIPS

CONCEPT: WORKING AND PLAYING TOGETHER HELP BUILD RELATIONSHIPS

PREPARATION:
1. Ties for a three-legged race
2. Materials for a collage

VOCABULARY: working, playing, together

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify ways people work and play together | 1. Take part in a three-legged race. After the race, discuss why it's difficult to race like this. | Organize a three-legged race. After the race ask students what difficulties they had. Discussion should emphasize that it's difficult because both people have to move at the same time, to move together, and that they have to work together. |
| | 2. Take part in a number of activities that involve working and playing together. | Divide students into groups and have each group participate in a number of activities such as: |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | - building lego<br>- playing house<br>- playing at the sandtable<br>- playing at the watertable<br>- drawing a group picture<br>- cleaning up together<br>- playing catch<br>- playing "Farmer In The Dell"<br>- playing tag |
| | 3. Identify ways people work and play together. | Ask students to name some ways people work and play together. Use specific people and specific situations to focus student responses.<br>People<br>- classroom assistant<br>- parent<br>- themselves<br>- other "known" people<br>Situations<br>- in class<br>- at home<br>- with friends |
| ii) describe the importance of working and playing together | 4. Compare working alone and working together. | Ask two students to move their desks or tables from the classroom to the hallway alone. Ask two students to move their desks/table to the hallway together. Other students observe and decide which was the more efficient way to move two desks/tables. If there is some question, get four more students to move the desks/tables back (two working alone and two working together). |
| | 5. Make a collage about working and playing together. | Have students cut out magazine pictures which illustrate working and playing together. |

**MENTAL AND EMOTIONAL WELL BEING**

GRADE: 1　　LESSON: 5　　THEME: RELATIONSHIPS

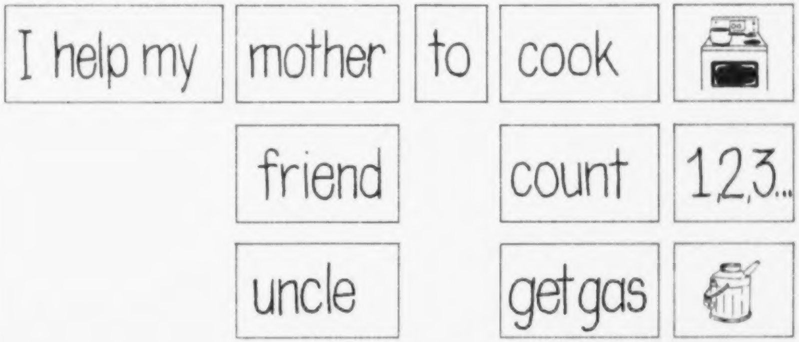
CONCEPT: HELPING OTHERS HELPS BUILD RELATIONSHIPS

PREPARATION:
1. "Who Will Help Me?" story and outlines (Activity Sheets ME14A,B,C,D,E)
2. Ingredients and equipment for blueberry bannock (or pancakes)
3. Pocket Chart and sentence strips
4. How Can You Help? scenarios (Activity Sheet ME15)
5. Materials for Helping Hands chart for Student Activity 7

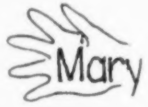
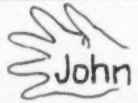
VOCABULARY: help, helping, helps

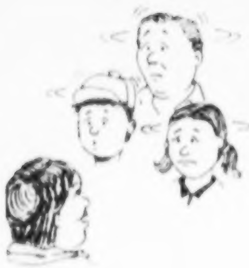
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify ways people help each other | 1. Listen to the story "Who Will Help Me?" | Refer to Activity Sheets ME14A,B,C,D,E.<br>This story is adapted from the Language Development "Berry Picking" Unit. Use the outlines to help tell the story. |
| | 2. Help make blueberry bannock. | If possible, divide students into two or three groups. Have each group help an adult make bannock. Adults should use the sentence pattern:<br>Who will help me (mix the dough)?<br>Students respond, "I will." |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Identify ways people help each other. | To prompt student responses, refer to the collages made in Lesson 4, Student Activity 5.<br>Make an experience chart to record responses using the sentence pattern:<br>The (teacher) helps (the student).<br>Discussion should include examples of:<br>- children helping children<br>- older child helping younger child<br>- teacher helping student<br>- parents helping at school<br>- nurse helping someone who is sick, etc. |
|  | 4. Identify ways in which they help/can help other people. | Ask students how they help/can help others:<br>- at home<br>- at school<br>- outside<br>Record student responses using a pocket chart and the sentence pattern as illustrated. |



| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 5. Identify ways in which they can help in various situations. | Refer to Activity Sheet ME15.<br>Give each student a copy of the Activity Sheet. Discuss each situation by asking students:<br>How can you help (clean the classroom)?<br>Students respond:<br>I can help (clean the classroom) by (erasing the boards). |
| ii) describe the importance of helping | 6. Describe why helping is important. | Refer to the story "Who Will Help Me?" Ask students what happened when father, Sarah and John refused to help prepare bannock. Ask them how they think mother must have felt (e.g., sad, angry, unloved) when no one would help her. Discuss why helping is important. |
| | 7. Make a classroom Helping Hands chart. | Have students draw around one hand and put their name on it. Paste the hands on the Helping Hands chart. |

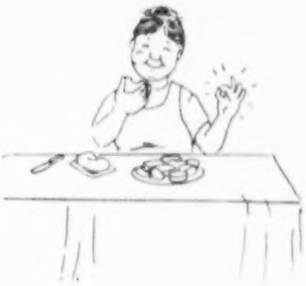
| Job | Helping Hand |
|---|---|
| cleaning the board |  |
| sharpening pencils |  |



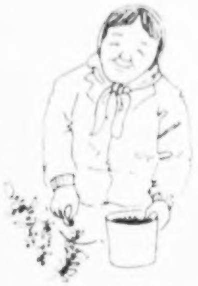
# WHO WILL HELP ME?

(M. Gilmour, C. McGregor)

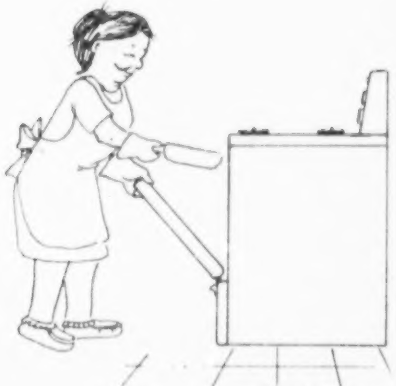
ME14A



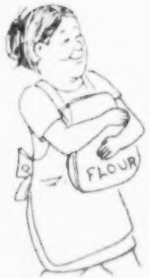
Mother lived with father, John and Sarah.
One day, mother said, "I think I'll make some blueberry bannock.
Who will help me pick some blueberries?"
"Not I," said father.
"Not I," said John.
"Not I," said Sarah.
"Then I will," said mother. And she did.



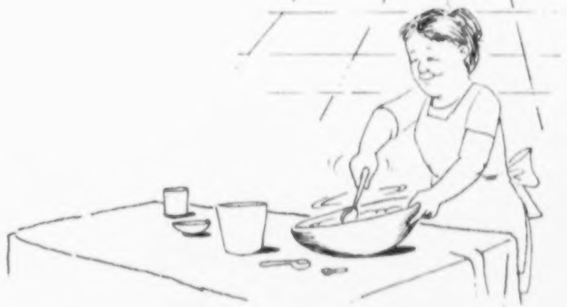
Mother said, "Who will help me buy some flour?"
"Not I," said father.
"Not I," said John.
"Not I," said Sarah.
"Then I will," said mother. And she did.



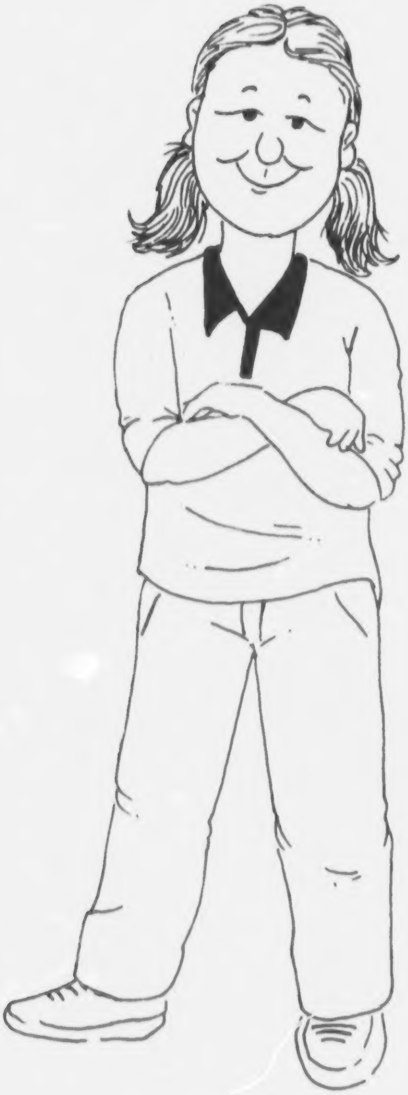
Mother said, "Who will help me mix the dough?"
"Not I," said father.
"Not I," said John.
"Not I," said Sarah.
"Then I will," said mother. And she did.



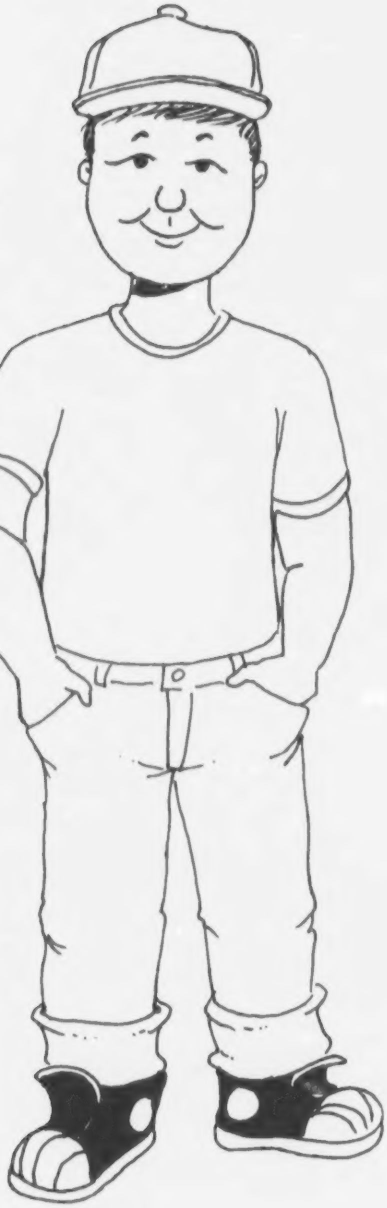
Mother said, "Who will help fry the bannock?"
"Not I," said father.
"Not I," said John.
"Not I," said Sarah.
"Then I will," said mother. And she did.



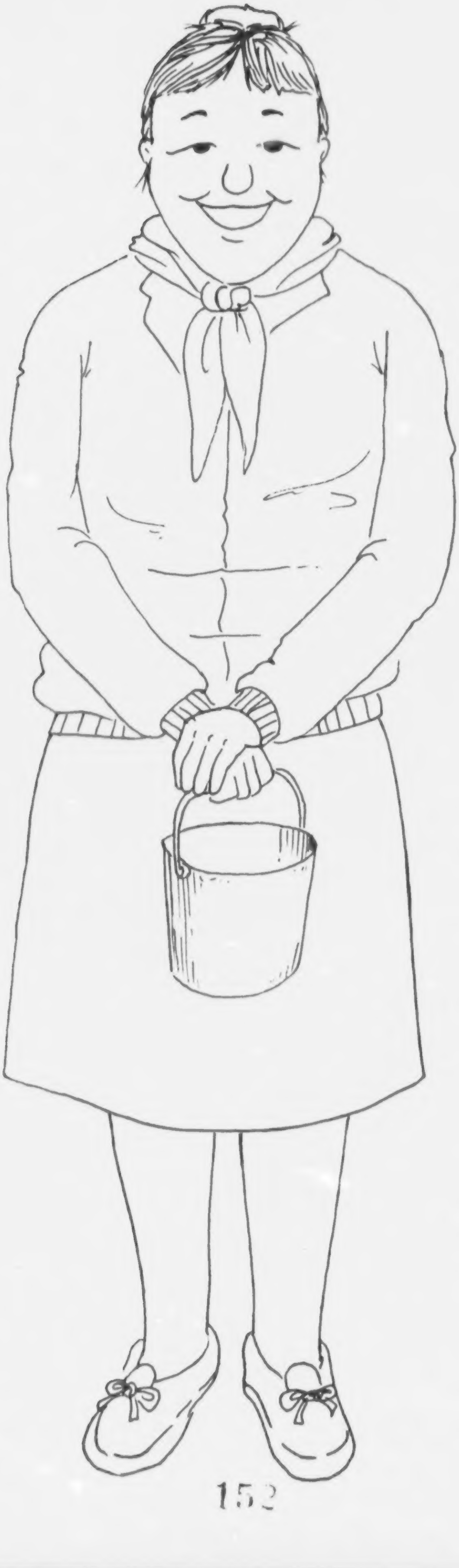
Mother said, "Who will help me eat the bannock?"
"I will," said father.
"I will," said John.
"I will," said Sarah.
'No you will not," said mother. "I will eat it myself."
And she did.



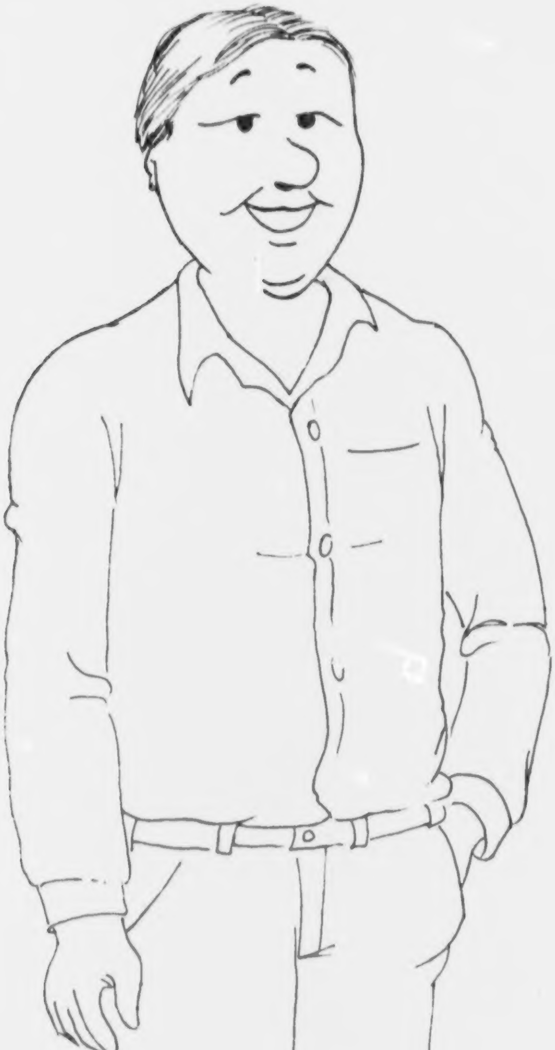
ME14B



ME14C

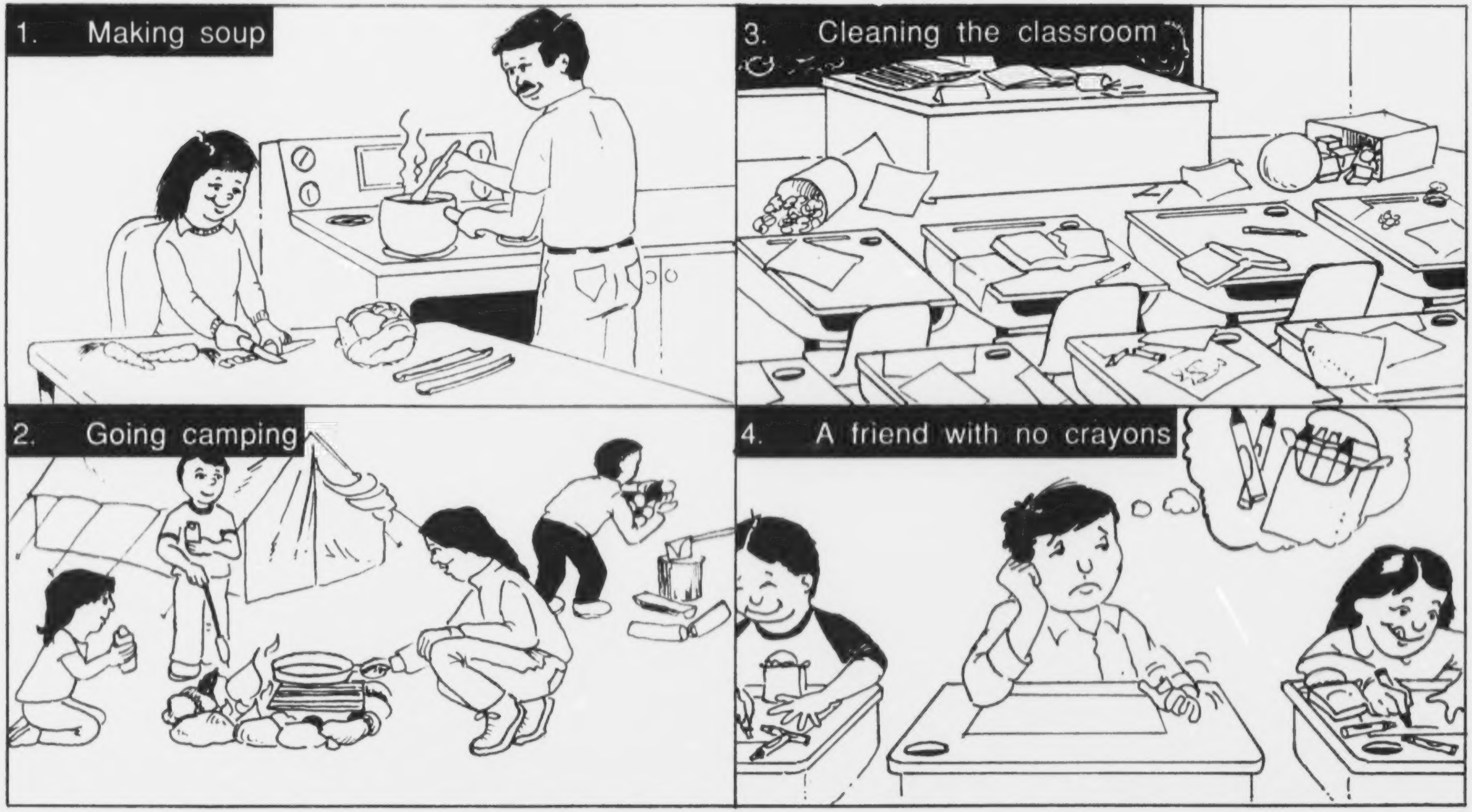


ME14D



ME14E

# HOW CAN YOU HELP?


1. Making soup
3. Cleaning the classroom
2. Going camping
4. A friend with no crayons

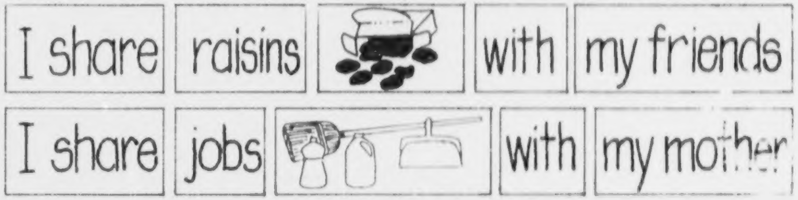
**MENTAL AND EMOTIONAL WELL BEING**

GRADE: 1 LESSON: 6 THEME: RELATIONSHIPS

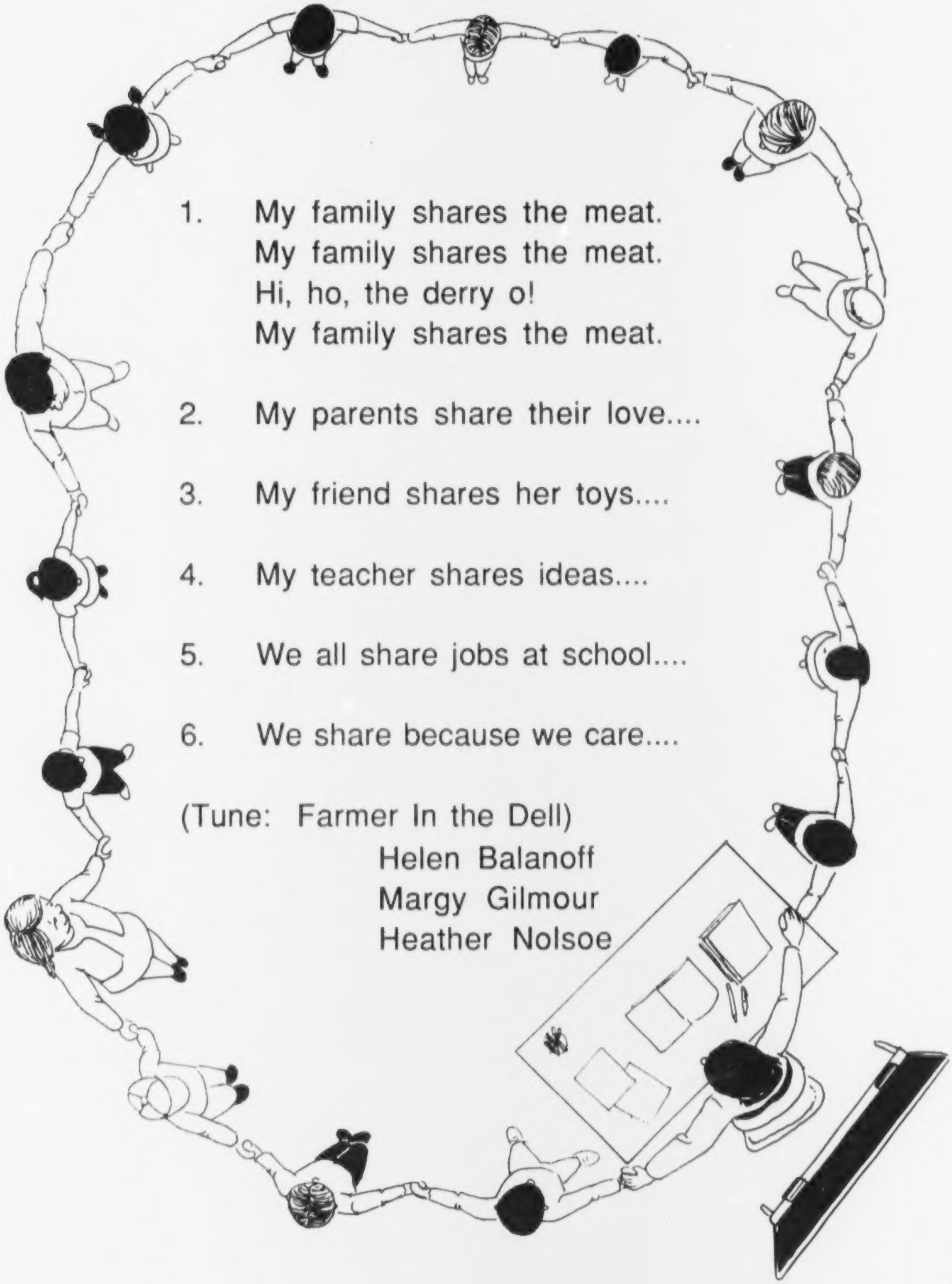
CONCEPT: SHARING HELPS BUILD RELATIONSHIPS

PREPARATION:
1. Nutritious snack to share with the students
2. Pocket chart and sentence strips
3. Two boxes of crayons
4. Materials for Sharing books
5. The "Sharing" song (Activity Sheet ME16)

VOCABULARY: sharing, share, ideas, care

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify things people share with each other | 1. Identify things people share with each other. | Introduce the lesson by sharing something with the students, e.g., a nutritious snack, raisins, carrots, etc.<br>Ask students what things they share with others. Record their responses using a pocket chart and the sentence pattern as illustrated.<br> I share raisins with my friends<br>I share jobs with my mother |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Responses should include sharing of:<br>- food<br>- ideas (school)<br>- time (parents, friends)<br>- responsibilities (family work)<br>- personal belongings (pencils, toys)<br>- skills (hunting, sewing) |
| ii) describe the importance of sharing | 2. Draw pictures using crayons. | Divide the class into groups. Give one student in each group a large box of crayons. Give all the other students one crayon. In one group, the student with the crayon box shares his/her crayons; in the other group, the student does not share. Have the students compare sharing and not sharing. |
| | 3. Describe why sharing is important. | Discuss with students the feelings they get when someone shares/doesn't share with them, when they share/don't share with someone else.<br>Refer to nutritious snack and crayon sharing activities. |
| | 4. Draw or cut out pictures of people sharing. | Make them into a Sharing book. Some students may be able to copy or write the sentence pattern on the bottom:<br>I share ______ with ______.<br>Share the book with other classes. |
| | 5. Learn the "Sharing" song. | Refer to Activity Sheet ME16. |



1. My family shares the meat.
My family shares the meat.
Hi, ho, the derry o!
My family shares the meat.

2. My parents share their love....

3. My friend shares her toys....

4. My teacher shares ideas....

5. We all share jobs at school....

6. We share because we care....

(Tune: Farmer In the Dell)
Helen Balanoff
Margy Gilmour
Heather Nolsoe

# GRADE 1

# TEACHER BACKGROUND INFORMATION

---

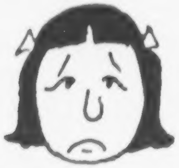
# MENTAL AND EMOTIONAL WELL-BEING

## MENTAL AND EMOTIONAL WELL BEING

Mental and emotional well-being refers to how a person feels, thinks and acts. If s/he feels "good", this translates into positive feelings, positive relationships with other people, decisiveness and an ability to cope with the stresses of every day life. A person who does not feel "good" has difficulty forming worthwhile relationships and has difficulty functioning in every day life. People derive those feelings about themselves, in large part, from the attitudes towards them of significant people in their lives.

### Poor Mental and Emotional Well-Being

#### Low Self-Esteem



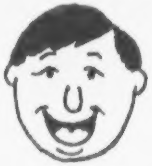
**Significant People**
- family
- friends
- peers
- teachers
- elders
- church leaders
- community members
- other people

**Attitudes**
- anger
- rejection
- distrust
- discouragement
- "put downs"

**Behaviours**
- failure
- fear
- guilt
- aggression
- withdrawal
- mistrust

### Healthy Mental and Emotional Well-Being

#### High Self-Esteem



**Significant People**
- family
- friends
- peers
- community members
- teachers
- elders
- church leaders
- other people

**Attitudes**
- love
- care
- acceptance
- encouragement
- trust

**Behaviours**
- success
- enthusiasm
- responsibility
- creativity
- co-operation
- ability to cope

The Mental and Emotional Well-Being Unit of the Health program aims to enable students to function effectively in a social context. An increase in self-understanding will lead to an enhancement of self-esteem. Together with the acquisition of decision-making, communication and coping skills, they will lead to an improvement in students' mental and emotional well-being, and in their ability to function effectively socially.

The school can contribute greatly in the development of a healthy mental and emotional well-being, through the attitudes of staff, and the atmosphere in both the classroom and the school. Positive attitudes and a positive atmosphere will enhance students' self-esteem.

For that reason, the creation of a positive classroom atmosphere is essential for teaching this unit. (Refer to "Introduction: Building A Positive Classroom Atmosphere".) Since the unit deals with very personal topics (students are, after all, learning about themselves, and nothing can be more personal than that!), teachers should be aware of the need for sensitivity and respect. Students should all be given the opportunity to participate in discussions, but should also be given the opportunity to pass, if they feel uncomfortable in sharing information with others. Students, and teachers, will gradually become more accustomed to the teaching methods used in this unit, and will soon begin to feel quite comfortable with the unit. Pilot testing of this unit indicated that students were hesitant for the first two or three lessons, but then really enjoyed learning about themselves!

Because of the personal nature of the unit, teachers must become familiar with their cultural appropriateness. Different cultural groups have different values regarding the self, as opposed to the group. They have different ways of appropriately expressing (or not expressing) feelings. Teachers should adapt the materials as necessary to fit the local situation. Wherever possible, members of the local culture should teach culturally sensitive topics to enhance and reinforce students' understanding of these topics within the appropriate cultural context.

# GRADE 1

## GROWTH AND DEVELOPMENT

**GROWTH AND DEVELOPMENT**

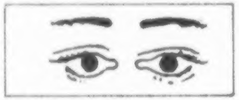
GRADE: 1 LESSON: REVIEW (OPTIONAL) THEME: BODY SYSTEMS

CONCEPT: SENSORY ORGANS HELP PEOPLE LEARN ABOUT THE ENVIRONMENT AND ARE IMPORTANT FOR HEALTH

PREPARATION:
1. Pocket Chart and sentence strips
2. "Hokey Pokey" song (Activity Sheet GD7)
3. "Body Helpers," "My World" poems (Activity Sheet GD8)

VOCABULARY: eyes, ears, mouth, tongue, nose, skin, see, hear, taste, smell, touch

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) name and locate the sensory organs of the body | 1. Review external body parts, by singing "Hokey Pokey" song. | Refer to Activity Sheet GD7. |
| | 2. Name the body parts used to see, hear, taste, smell, touch. | Ask students to point to the various body parts as they name them. |

<table>
<tr><th>OBJECTIVES</th><th>STUDENT ACTIVITIES</th><th>TEACHER NOTES</th></tr>
<tr><td>ii) explain what the sensory organs do</td><td>3. State what the sensory organs do.</td><td>Ask students to tell what they use each sensory organ for. Record student responses using a pocket chart and the sentence pattern as illustrated.<br>I use my  to see</td></tr>
<tr><td></td><td>4. Review the poem "Body Helpers."</td><td>Refer to Activity Sheet GD8.</td></tr>
<tr><td></td><td>5. Identify why the sensory organs are important.</td><td>Make an experience chart using the following situations. At the top of the chart write the sentence pattern:<br>My (ears) help (warn me of danger)<br>
<table>
<tr><th>SITUATION</th><th>SENSORY ORGANS</th><th>USES</th></tr>
<tr><td>whistle blows</td><td>ears</td><td>stop people<br>warn me of danger</td></tr>
<tr><td>ice on lake</td><td>eyes</td><td>warn me of danger</td></tr>
<tr><td>candle, match</td><td>eyes<br>nose</td><td>warn me of danger</td></tr>
</table></td></tr>
</table>

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|

| SITUATION | SENSORY ORGANS | USES |
|---|---|---|
| fresh bannock | eyes<br>nose<br>mouth | me learn about my world<br>me enjoy my world |

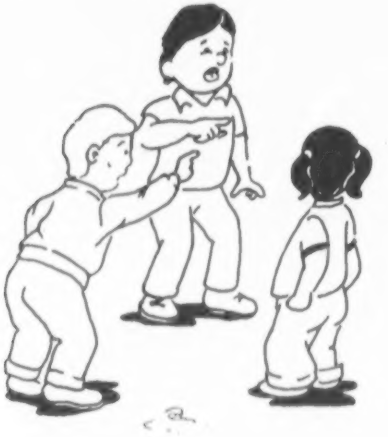
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 6. Learn the poem "My World." | Refer to Activity Sheet GD8. |

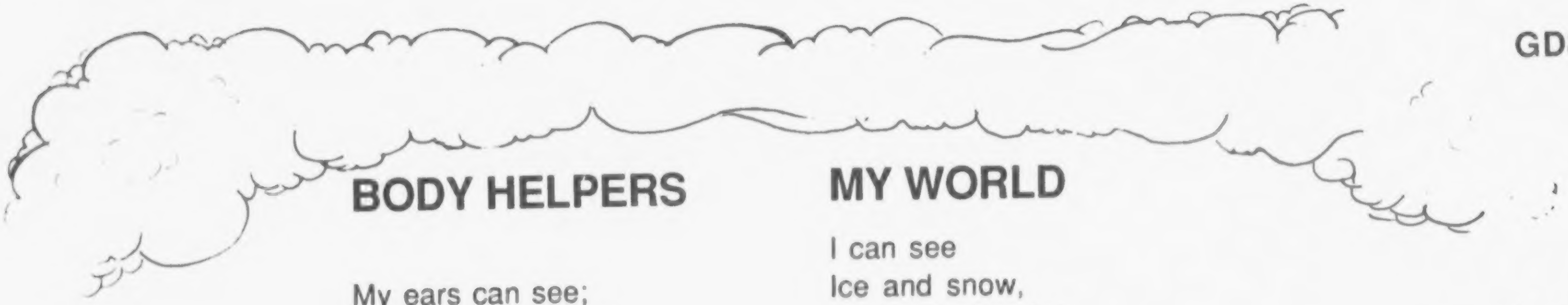
GD7

# HOKEY POKEY

You put one hand in.
You put one hand out.
You put one hand in
And shake it all about.
You do the hokey pokey
And you turn around.
That's what it's all about.

(Repeat substituting other body parts.)





## BODY HELPERS

My ears can see;
My nose can smell;
I use my ears
To hear the bell.

My tongue can taste;
My teeth can chew;
I use my feet
To run with you.

My fingers touch;
My lips can tell;
I use my senses
To keep me well.

Jim Reid

## MY WORLD

I can see
Ice and snow,
A sky that's blue.

I can taste
Chocolate ice cream,
Caribou stew.

I can hear
Music, laughter,
Words you say.
I can smell
Moosehide, sealskin,
Food at "The Bay."

I can touch
Fur and duffle,
A baby's skin.

What a wonderful world
I'm living in!

Adapted by: Heather Nolsoe
Cathy McGregor
Helen Balanoff

**GROWTH & DEVELOPMENT**

GRADE: 1 LESSON: 1 THEME: BODY SYSTEMS

CONCEPT: THE SENSE OF TOUCH HELPS PEOPLE LEARN ABOUT THE ENVIRONMENT AND IS IMPORTANT FOR HEALTH

PREPARATION:
1. Prepare sets of matched bags containing familiar objects with different textures
2. Bowls of water - some hot, some cold
3. Several blindfolds
4. "Touch" poem (Activity Sheet GD9)
5. Sears catalogues

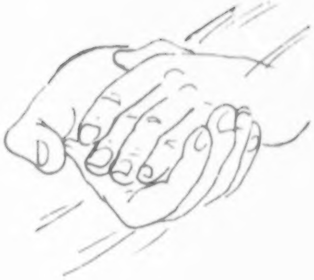
VOCABULARY: touch, skin, safe, take care of/protect, hot, cold, soft, hard, smooth, rough, flat, bumpy, slippery, sticky

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) name and locate the body parts most sensitive to touch | 1. Select identical objects from two matched bags, using only the sense of touch. | Divide students into small groups. Give each group a set of matched bags. Students take turns selecting identical objects from the two bags. |
| | 2. Put their hands into two bowls of water, one hot, and one cold. Tell what they feel. | Be sure hot water is safe for students to put their hands in. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 3. Touch a blindfolded student on different parts of the body with different objects. | Group students in pairs or small groups. Blindfold one student. Touch an object to different body parts (e.g., arm, foot, lips, fingers). The student:<br>- names the object<br>- names the body part used to identify the object<br>Objects can include:<br>- ice cube<br>- feather<br>- fur<br>- sandpaper |
| | 4. Name and point to body parts that are most sensitive to touch. | These are:<br>- lips<br>- fingers<br>- bottoms of feet |
| ii) describe the importance of touch | 5. Identify why the sense of touch is important. | The skin is sensitive to temperature, pain, pressure and texture. Emphasize that the sense of touch enables people to:<br>- learn about/enjoy their world<br>- keep safe (at home, camping, playing, etc.)<br>Make an experience chart using the following situations. Have students respond using the sentence pattern:<br>When I touch a (situation) my skin (use). |

<table>
<tr><th>OBJECTIVES</th><th>STUDENT ACTIVITIES</th><th>TEACHER NOTES</th></tr>
<tr><td></td><td></td><td><table>
<tr><th>Situation</th><th>Uses</th></tr>
<tr><td>carving</td><td>helps me learn about my world</td></tr>
<tr><td>sharp object</td><td>warns me of danger</td></tr>
<tr><td>hot Coleman stove</td><td>warns me of danger</td></tr>
</table></td></tr>
<tr><td></td><td>6. Learn the "Touch" poem.</td><td>Refer to Activity Sheet GD9.<br>Use a fake bug, ice cube, etc.</td></tr>
<tr><td></td><td>7. Make a "feeling" bulletin display of different textures.</td><td>Have students name and bring to class objects which are:<br>- soft (e.g., fur)<br>- smooth (e.g., plastic)<br>- hard (e.g., rock)<br>- rough (e.g., sand-paper)<br>- etc. (Refer to vocabulary.)</td></tr>
<tr><td>iii) identify positive health habits related to the sense of touch</td><td>8. Make a collage of clothing appropriate for different kinds of weather.</td><td>Have students cut out a variety of clothing for different weather and make a collage. Ask them why they wear different clothes in different weather.</td></tr>
<tr><td></td><td>9. Name other things to do to protect the skin.</td><td>Ask students what other things they do to protect the skin.</td></tr>
</table>

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  |  | Have students answer, using the sentence pattern:<br>I can take care of my skin by ___________.<br>- not walking on sharp objects<br>- washing the skin<br>- wearing appropriate clothing for the weather<br>Encourage students to practise these positive health habits. |



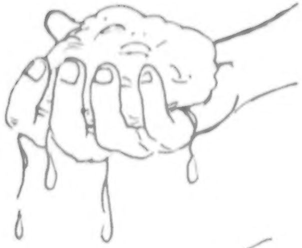
# TOUCH

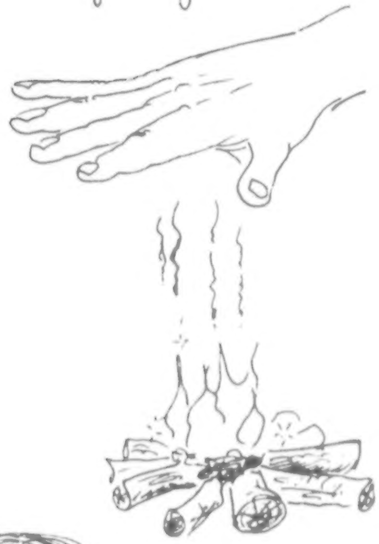
Clap your hands
And wiggle your toes.
Feel that bug
Land on your nose.

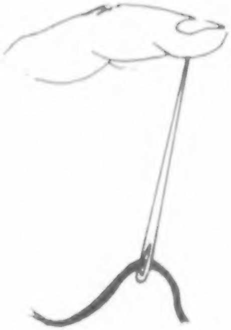
"Ouch! That's sharp"
And "Ooh! That's cold."
Our fingers help
Feel things we hold.

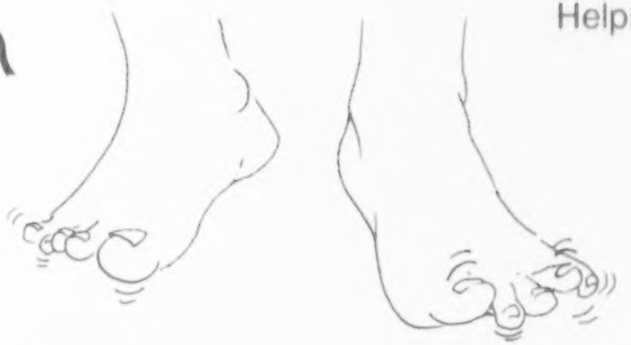
Road's too bumpy
And that's too hot!
Our sense of touch
Helps us a lot.

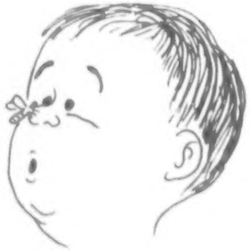
Jim Reid











**GROWTH & DEVELOPMENT**

GRADE: 1 LESSON: 2 THEME: BODY SYSTEMS

CONCEPT: THE SENSE OF TASTE HELPS PEOPLE LEARN ABOUT THE ENVIRONMENT AND IS IMPORTANT FOR HEALTH

PREPARATION:
1. Check for student allergies prior to Student Activity 1
2. Bring food samples e.g., bannock, peanut butter
3. A bowl of hot soup

VOCABULARY: mouth, lips, tongue, metal, taste, take care of/protect

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) name and locate the body parts that are responsible for taste | 1. Identify foods using the sense of taste. | Blindfold students and have them taste small food samples and name each. Samples may include:<br>- peanut butter<br>- honey/sugar<br>- bannock<br>- fish<br>- salted crackers<br>- dry meat<br>- pickles |
| | 2. Name and locate the body parts responsible for taste. | Ask students to point to and name parts of the body responsible for taste:<br>- mouth<br>- lips<br>- tongue |

<table>
<tr><th>OBJECTIVES</th><th>STUDENT ACTIVITIES</th><th>TEACHER NOTES</th></tr>
<tr><td>ii) describe the importance of taste</td><td>3. Describe why the sense of taste is important.</td><td>Discuss what would happen if they didn't have a tongue. Emphasize that the sense of taste enables people to:<br>- enjoy food<br>- identify food<br>- keep safe<br><br>Make an experience chart using the following and other situations. Have students respond using the sentence pattern:<br><br>When I taste (situation) my (mouth/tongue) (use).<br><br><table><tr><th>Situation</th><th>Use</th></tr><tr><td>ice cream</td><td>helps me enjoy food</td></tr><tr><td>hot soup</td><td>warns me of danger</td></tr></table></td></tr>
<tr><td>iii) identify positive health habits related to the sense of taste</td><td>4. Discuss how to protect the sense of taste.</td><td>Using a bowl of hot soup as an example, ask students what they can do to protect the sense of taste.<br><br>Ask students what other things they do to protect the sense of taste. Have students answer using the sentence pattern:<br><br>I can take care of my (mouth/tongue) by _____.<br><br>- eating or drinking foods that are not too hot</td></tr>
</table>

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  |  | - asking an adult I trust before tasting an unknown substance<br>- not sticking my tongue on cold metal<br>- brushing my teeth and tongue<br>Encourage students to practise these positive health habits. |

**GROWTH & DEVELOPMENT**

GRADE: 1 LESSON: 3 THEME: BODY SYSTEMS

CONCEPT: THE SENSE OF SMELL HELPS PEOPLE LEARN ABOUT THE ENVIRONMENT AND IS IMPORTANT FOR HEALTH

PREPARATION:
1. Bring three samples of foods and other substances for Student Activity 1 (e.g., three onion samples) (Place samples in covered jars with numbers e.g., three jars numbered 1, each containing onion sample)
2. Prepare a class set of Happy & Sad Faces (Activity Sheet GD10)

VOCABULARY: nose, smell, take care of, safe, danger, nose bleed, pleasant, unpleasant

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) name and locate body parts responsible for smell | Students:<br>1. Identify foods and other substances using the sense of smell. | Divide students into two or three groups. Give each group a set of sample substances. Have them smell and name each substance. (Assure students that all are safe to smell.) Samples may include:<br>- onion<br>- orange peel<br>- seal meat<br>- banana<br>- chocolate<br>- fish<br>- perfume<br>- tanned moosehide<br>- sour milk |

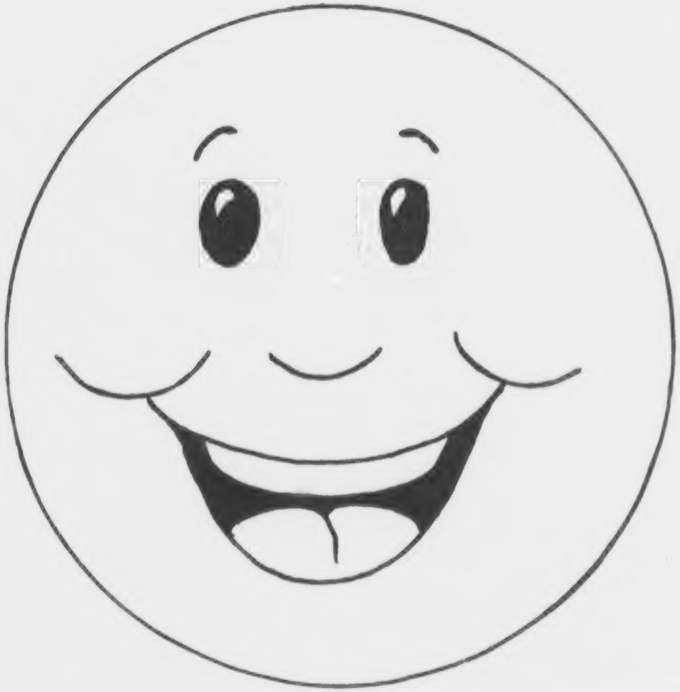
<table>
<tr><th>OBJECTIVES</th><th>STUDENT ACTIVITIES</th><th>TEACHER NOTES</th></tr>
<tr><td></td><td>2. Name and locate body parts responsible for smell.</td><td>Ask students to point to and name the body part responsible for smell.</td></tr>
<tr><td>ii) describe the importance of smell</td><td>3. Describe why the sense of smell is important.</td><td>Discuss what would happen if they didn't have a nose. Emphasize that the sense of smell enables people to:<br>- learn about their world<br>- enjoy their world<br>- keep safe (detect smoke, harmful substances, spoiled meat)<br><br>Make an experience chart using the following situations. Have students answer using the sentence pattern:<br><br>When I smell (situation) my nose (use).<br><br>
<table>
<tr><th>Situation</th><th>Use</th></tr>
<tr><td>smoke</td><td>warns me of danger</td></tr>
<tr><td>bad meat</td><td>warns me of danger</td></tr>
<tr><td>flowers, plants, trees</td><td>helps me learn about my world/enjoy my world</td></tr>
</table>
</td></tr>
</table>

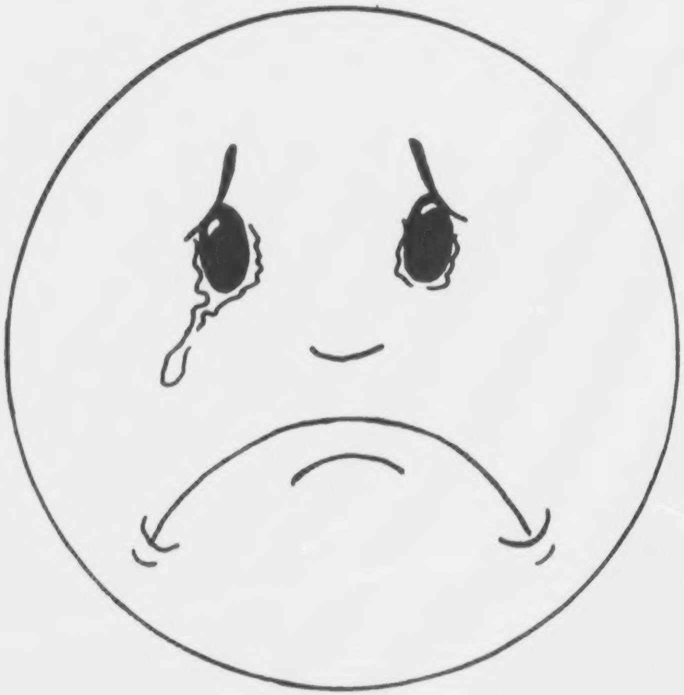
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Classify smells from various objects into pleasant and unpleasant smells. | Refer to Activity Sheet GD10.<br>Have students cut out the faces, and colour the happy face yellow and the sad face red.<br>Show each substance from Student Activity 1. Each student decides whether the substance has a pleasant or unpleasant smell, and holds up the appropriate face. Lead a discussion about the reasons for differences of opinion. |
| iii) identify positive health habits related to the sense of smell | 5. State why people use tissues. | Give students tissues. Ask them why we use tissues. Tissues are used:<br>- to blow the nose<br>- to protect it |
|  | 6. Demonstrate and practise the correct way to blow their nose. | Points to include are:<br>- keep the mouth slightly open when blowing the nose (prevents pressure build up in eustachian tubes)<br>- cover nose with tissue<br>- do not blow too hard |
|  | 7. Name other things to do to protect the sense of smell. | Ask students what other things they do to protect the sense of smell. Students can answer using the sentence pattern:<br>I can take care of my nose by __________.<br>- caring properly for a nose bleed<br>- not sniffing unknown substances |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Encourage students to practise these positive health habits. |
| | 8. Demonstrate the proper way to care for a nose bleed. | Proper care includes:<br>- sit forward in a chair<br>- apply pressure to nose until bleeding stops<br>- apply cold to nose until bleeding stops<br>- report nose bleed to an adult |

GD10

# HAPPY AND SAD FACES





**GROWTH & DEVELOPMENT**

GRADE: 1 LESSON: 4 THEME: DISEASE PREVENTION

CONCEPT: THE BODY HAS WAYS OF SHOWING SICKNESS

PREPARATION:
1. "Miss Polly Had A Dolly" song (Activity Sheet GD11)
2. A doll

VOCABULARY: sick, hurts, tummy, runny, watery, hot, cold, tired

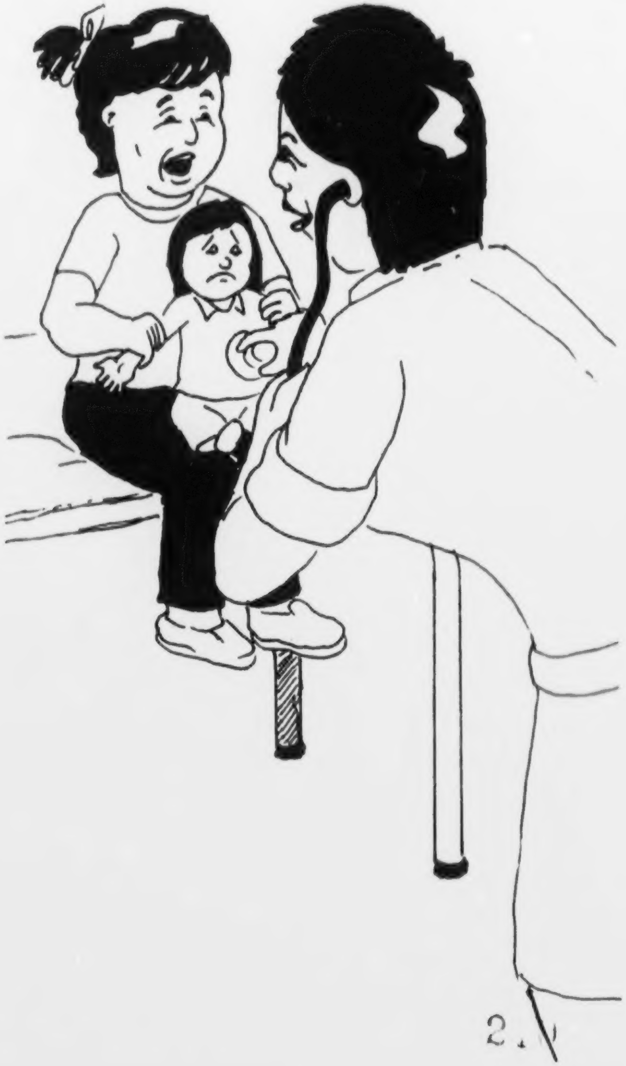
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify common signs of sickness | 1. Discuss how the body tells a person s/he is sick. | Ask students if they have ever been sick. Ask them how their bodies told them they were sick. Have them respond using the sentence pattern:<br>I know I am sick when I _____________.<br>- have a pain<br>- feel a chill<br>- am not hungry<br>- have a fever<br>- have watery eyes<br>- throw up<br>- have a stomach ache<br>- feel tired a lot<br>- have a sore throat |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 2. Practise asking and telling what is wrong with them. | Have students practise asking and telling what's wrong with them, using a doll as a prop. Have students form a circle. Point to a part of the doll (e.g., eyes) and ask: "What's wrong with you?"<br>Students respond, "I have (watery eyes)."<br>When students have practised answering as a group have students respond individually. |
|  | 3. Learn "Miss Polly Had A Dolly." | Refer to Activity Sheet GD11. |
|  | 4. Draw pictures of themselves when they were sick. | Have students draw pictures of themselves when they were sick. Have them write under the picture a sentence about how they knew they were sick. |

# MISS POLLY HAD A DOLLY

Miss Polly had a dolly
Who was sick, sick, sick.
So she took her to the nursing station
Quick, quick, quick!
She told the nurse that her doll was ill;
She had a runny nose and she had a chill.
The nurse looked at dolly
And she shook her head
And she said "Miss Polly
Put her straight to bed.
If she stays at home
For a day or two,
She will soon be better
From the flu, flu, flu."

Adapted by: Helen Balanoff



**GROWTH & DEVELOPMENT**

GRADE: 1 LESSON: 5 THEME: DISEASE PREVENTION

CONCEPT: DISEASES ARE SPREAD IN MANY WAYS

PREPARATION:
1. Flour for Student Activity 4
2. "Germs" poem, "Coughs and Sneezes" poem (Activity Sheet GD12)

VOCABULARY: spread, germs, dirty, sick, cough, sneeze, disease, common, names of diseases

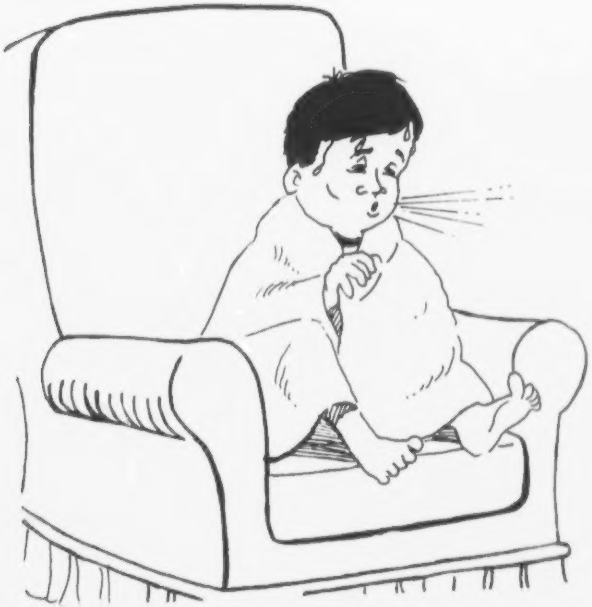
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) state that germs may cause disease | 1. Tell if they have ever been sick, and what was wrong with them. | Refer to Grade 1, Lesson 4. |
| | 2. Tell what they think made them sick. | Explain that a germ is something that you can't see, but it is alive and can make you sick. Germs are found everywhere. Germs may enter the body through the skin, the mouth and the nose. |
| | 3. Name some common childhood diseases. | Ask students to name some common childhood diseases. Some childhood diseases caused by germs are: colds, flu, strep throat, chicken pox, T.B., impetigo, etc. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) identify ways that diseases spread | 4. Demonstrate how germs spread. | Place some flour in the palm of your hand. Cough or pretend to sneeze at it. Students observe particles of flour spreading. This represents how germs are spread when a person coughs or sneezes. |
| | 5. Name ways that germs and disease spread. | Ask students to name ways that germs and diseases spread. Use the sentence pattern:<br>Germs can spread when we ___________.<br>- cough<br>- sneeze<br>- eat bad food<br>- touch dirty things<br>- drink dirty water<br>- touch animals<br>- don't wash after going to the bathroom<br>- don't wash before eating<br>- get insect bites |
| | 6. Learn the poem "Coughs and Sneezes." | Refer to Activity Sheet GD12. |
| | 7. Learn the poem "Germs." | Refer to Activity Sheet GD12.<br>Divide the class into two groups. Have each group learn one of the poems and say it to the other group. |

## COUGHS AND SNEEZES

Germs are spread through
Coughs and sneezes.
Use a tissue
To stop diseases.

Cathy McGregor

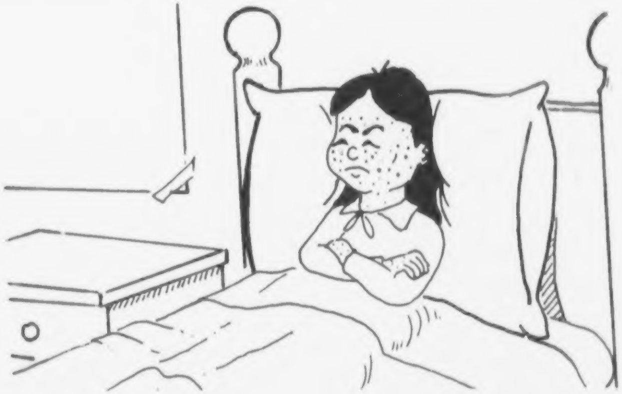


## GERMS

Johnny's got a sore throat.
Mary's got the measles.
Both of them are spreading germs.
Pop goes the weasel!

Now Betty's got a sore throat.
Jimmy's got the measles.
Both of them have caught the germs.
Pop goes the weasel!

Adapted by: Helen Balanoff



## GROWTH & DEVELOPMENT

GRADE: 1 LESSON: 6 THEME: DISEASE PREVENTION

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CONCEPT: THE SPREAD OF DISEASES CAN BE PREVENTED

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PREPARATION:
1. Collect props for healthy habits which prevent or reduce the spread of disease - e.g., soap, tissue, clean cup, medicine, bandaid, garbage bag
2. Magazines and materials for posters for Student Activity 4

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VOCABULARY: germs, disease, prevent, spread, (props as necessary)

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify ways to prevent the spread of disease | 1. Wash hands with warm, soapy water and tell why people do this. | Take students to the washrooms. Let them wash hands with warm, soapy water. Ask them why people wash hands. Examples are:<br>- to make them clean<br>- to get rid of germs<br>- to prevent or reduce the spread of disease |
| | 2. Name other things to do to prevent or reduce the spread of disease. | Use props to stimulate responses:<br>- soap<br>- washcloth<br>- tissues<br>- clean towel |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | - clean dishes<br>- medicine<br>- bandaid<br>- garbage bag<br>Students respond using the sentence pattern:<br>I can prevent the spread of disease by ______.<br>- washing my hands before eating<br>- washing my hands after going to the bathroom<br>- using a tissue to cover my nose and mouth when I sneeze/cough/blow my nose<br>- throwing dirty tissues in the garbage/toilet<br>- using my own towel, cup, fork, etc.<br>- telling an adult if I feel sick<br>- taking medicine as told by an adult I trust<br>- treating cuts and scratches at once<br>- keeping the area where I live and play clean |
| | 3. Act out some healthy habits to prevent the spread of disease. | Distribute props from Student Activity 2. Students with props role play healthy habits while others guess the healthy habits. |
| | 4. Make a poster of healthy habits to prevent the spread of disease. | Students can cut pictures out of magazines or draw pictures of healthy habits to make posters. Display in the school, nursing station, or elsewhere in the community. |

# GRADE 1

# TEACHER BACKGROUND INFORMATION

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## GROWTH AND DEVELOPMENT

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## TOUCH, TASTE, SMELL

### TOUCH

Nerves in the skin receive sensations of touch - pressure, pain and temperature. When these skin receptors are stimulated, the brain interprets what has happened and a message is sent causing a reaction.

Fingers are more sensitive and have a better sense of touch than most areas although there are nerve endings found in the mouth and inside the body that are sensitive to distress, such as stomach ache/sore throat/ ear ache, etc. This is called organic sense. Some people do not have a sense of touch and may hurt or cut themselves without knowing it. Some have a low threshold to pain, while others can tolerate a great deal of pain.

Positive health habits related to the sense of touch include:

- avoiding hazards that can hurt the body (e.g., hot water, steam, sharp objects, cramped places)
- keeping the skin clean
- dressing warmly in winter to avoid freezing the skin

### TASTE

Taste buds located in the mouth and on the tongue allow for taste sensation. Individuals may prefer and enjoy food through their sense of taste. Nerve endings for the taste buds in the tongue are linked to the nerve below the tongue. When taste buds and nerves are stimulated by foods with salty, sweet, sour or bitter tastes, messages are sent to the brain and registered as specific tastes.

Positive health habits related to the sense of taste include:

- brushing the tongue clean when brushing the teeth
- eating foods that are not too hot
- drinking fluids that are not too hot
- not putting the tongue on very cold objects
- not tasting unknown substances

Safely removing a tongue that has been stuck to cold metal involves:

- NOT trying to pull the tongue away from cold metal;
- waiting for someone to pour cool water on tongue area stuck to cold metal

## SMELL

The sense of smell is not as well understood as some other senses. It is mainly a subjective phenomenon that is rather poorly developed in people.

The olfactory nerve is located above the nasal cavity. Small hair-like projections extend into the nose from this nerve. When air or an object is sniffed, the vapors stimulate the hairs of the olfactory nerve and a message is sent to the brain. This signal is registered as a smell.

Smell contributes to the sense of taste or may be confused with it. People who have a cold often say that they cannot taste anything, when there may be nothing wrong with their sense of taste. The sense of smell can alert an individual to dangerous situations such as smoke or chemical fumes.

Positive health habits related to the sense of smell include:

- keeping the nose clean
- blowing the nose carefully to remove mucus that catches dust and dirt
- avoiding hazardous household products that would harm the nose
- avoiding glues and inhalants

SOURCE: Physical Well-Being Teaching Aids,
Manitoba Education, 1986

# GRADE 1

# NUTRITION

**NUTRITION**

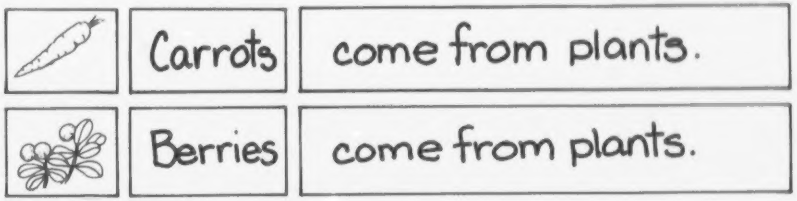
GRADE: 1 LESSON: 1 THEME: FOOD IDENTIFICATION

CONCEPT: PLANTS PROVIDE PEOPLE WITH A VARIETY OF FOOD

PREPARATION:
1. Pictures of foods and sentence strips for Student Activities 1 and 2
2. Samples of foods that come from plants
3. Food samples for Student Activity 3
4. Seeds, carrot tops, etc. that can be grown in the classroom
5. Prepare a class set of Foods from Plants colouring sheets (Activity Sheets N4A and N4B)

VOCABULARY: plants, flowers, leaves, stems, roots, seeds, vegetables, fruit

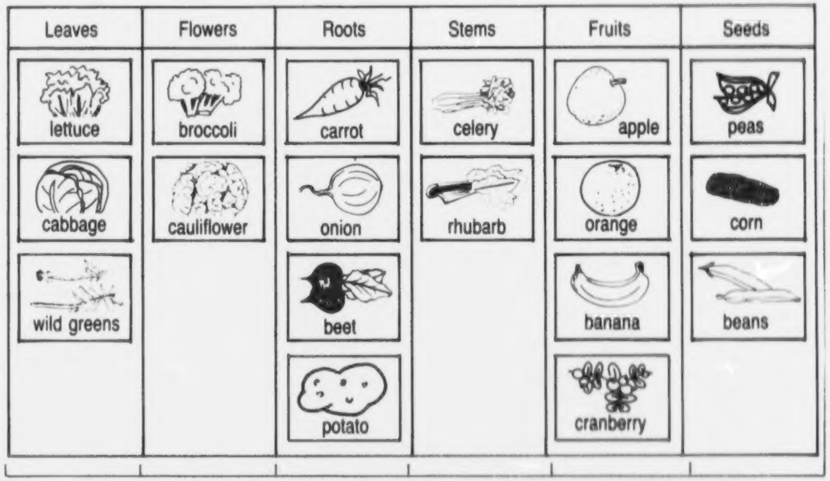
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background information: Page –<br>This lesson relates to the Science Language Development Unit, Plants, Topic F (We Use Plants).<br>Prior to allowing students to eat food in class, teachers should check with parents to find out if any students have food allergies. |
| i) give examples of foods | 1. State that some foods come from | Show students examples of different kinds of food that come from plants<br>e.g., carrots<br>berries |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Ask students where the foods come from.<br>Record student responses using a pocket chart, picture cards and sentence strips as illustrated.<br> Carrots<br>come from plants.<br>Berries<br>come from plants. |
| | 2. Give examples of other foods that come from plants. | Add to the pocket chart list. Other examples include:<br>- onions<br>- potatoes<br>- lettuce<br>- tomatoes<br>- apples<br>- corn<br>- broccoli<br>- wild greens<br>- celery<br>- mushrooms<br>- labrador tea<br>- cauliflower<br>- cranberries<br>- peas<br>- nuts<br>- rice |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Name the different parts of plants that can be eaten, and give examples. | Have students taste a variety of foods from plants and ask them to identify the part of the plant they are eating. For example: |

| Food | Plant Part |
|---|---|
| popcorn | seed |
| berries | fruit |
| rhubarb | stem |
| carrot | root |
| cauliflower | flower |
| lettuce | leaf |

Ask students to give other examples and record their responses on an experience chart as shown.



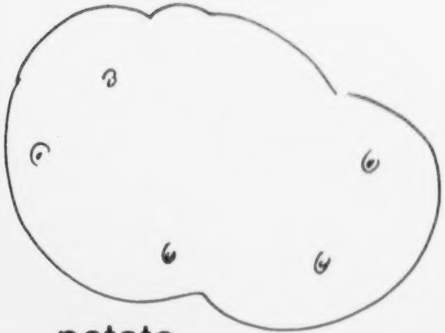
| Leaves | Flowers | Roots | Stems | Fruits | Seeds |
|---|---|---|---|---|---|
| lettuce | broccoli | carrot | celery | apple | peas |
| cabbage | cauliflower | onion | rhubarb | orange | corn |
| wild greens |  | beet |  | banana | beans |
|  |  | potato |  | cranberry |  |

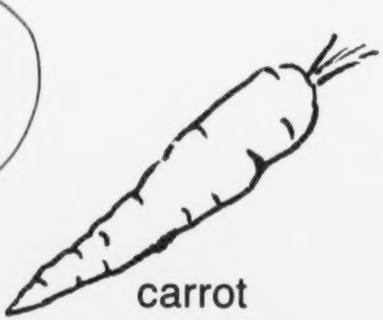
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Observe plants as a source of food. | Provide students with the opportunity to see food while it is still on the plant, to pick this food, prepare it and eat it.<br>Either go berry picking, or grow something in the classroom,<br>- potatoes<br>- tomatoes (bush type)<br>- carrots<br>- sprouts<br>- parsley<br>While berry picking is faster, growing their own food will help students appreciate the time required for food to grow. The bag of potatoes they buy at the store and eat in a few days took months to grow! |
|  | 5. Colour the Foods from Plants worksheet. | Refer to Activity Sheets N4A and N4B. |

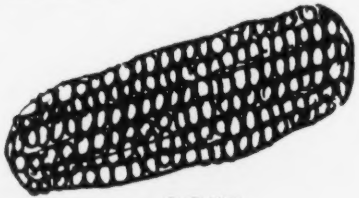
# FOODS FROM PLANTS

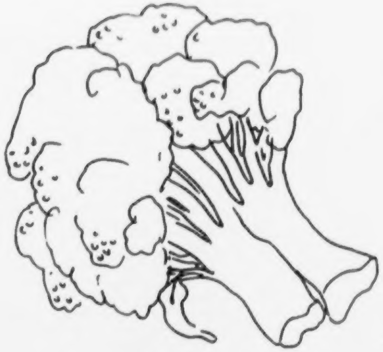
N4A

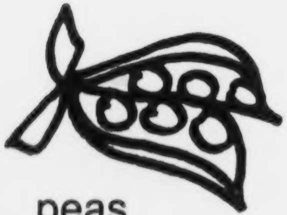
## VEGETABLES

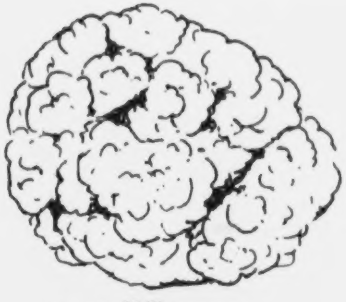

potato

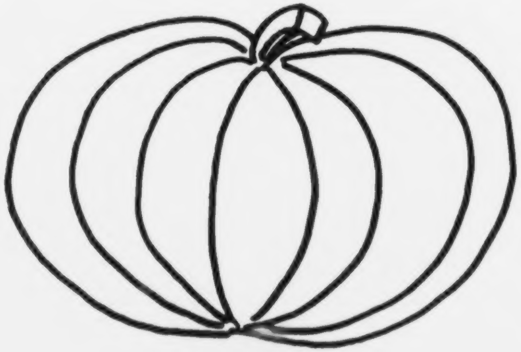

carrot

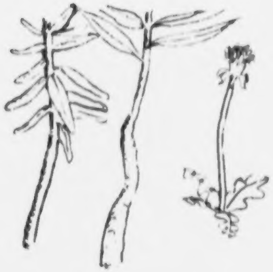

corn


broccoli


peas


cauliflower


pumpkin

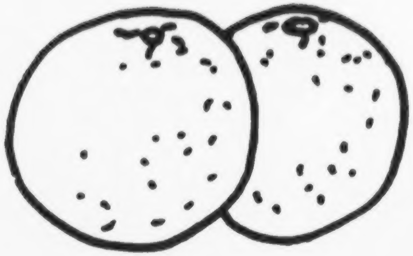

wild greens

Name: ______________________________

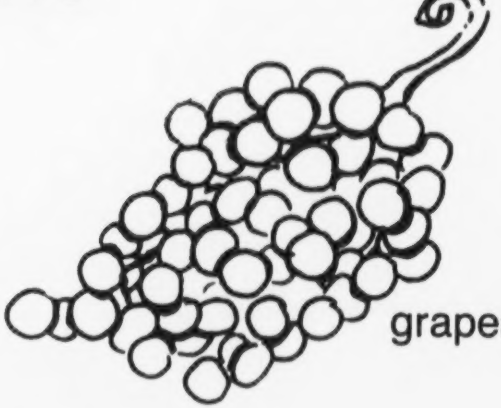
# FOODS FROM PLANTS

**N4B**

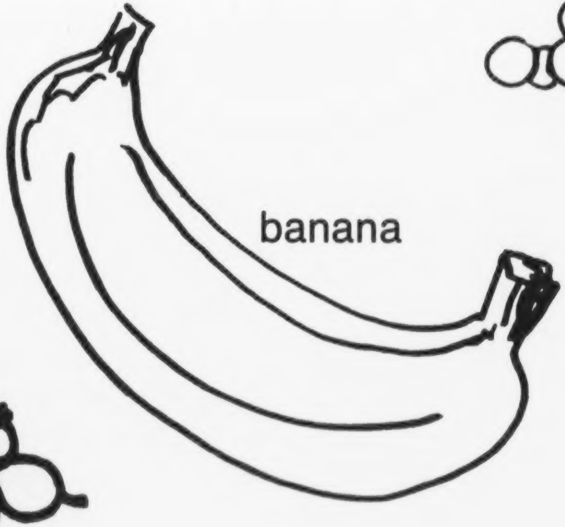
## FRUIT



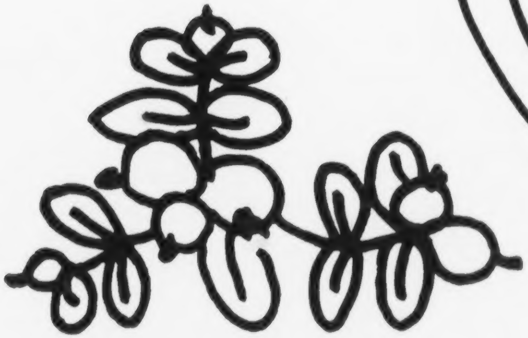
orange



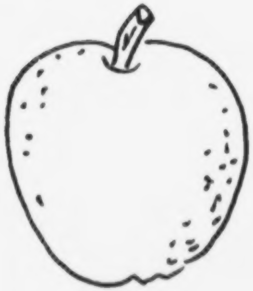
grapes



banana



cranberries



apple

Name: ______________________

**NUTRITION**

GRADE: 1 LESSON: 2 THEME: FOOD IDENTIFICATION

CONCEPT: ANIMALS PROVIDE PEOPLE WITH A VARIETY OF FOOD

PREPARATION:
1. Pictures of foods and sentence strips for Student Activity 1
2. Samples of foods that come from animals
3. Ingredients to make Eggtopus (Student Activity 3)

VOCABULARY: animals, names of specific animals

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background information: Page —<br>This lesson relates to Science, Language Development Units, Arctic Land Animals, Subarctic Land Animals, Birds, Marine Mammals/Whales, Fish - Topic F in all units. |
| i) give examples of foods | 1. State that some foods come from animals. | Show students examples of different kinds of food that come from animals.<br>e.g., caribou meat<br>chicken<br>milk |

2. Give examples of other foods that come from animals.

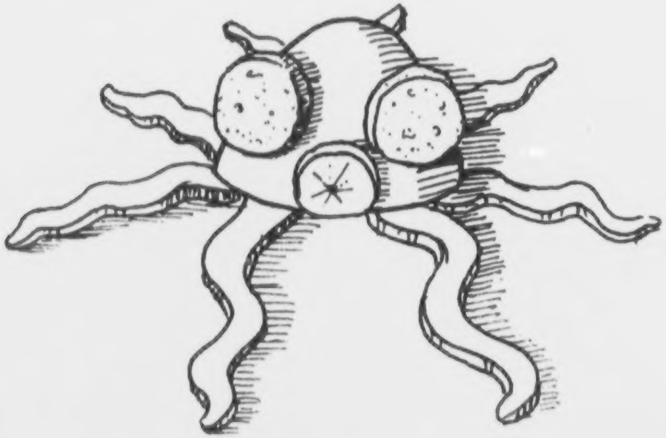
Ask students where the food comes from. Record student responses using a pocket chart as illustrated.

| | | |
|---|---|---|
| | Meat | comes from an animal. |
| | Eggs | come from an animal. |
| | Milk | comes from an animal. |

Ask students to give examples of foods which come from animals and record them on an experience chart using the headings as illustrated.

| Meat We Hunt | Meat We Buy | Fish | Birds | Eggs | Milk |
|---|---|---|---|---|---|
| caribou<br>moose<br>muskox<br>rabbit<br>seal<br>whale<br>bear<br>muskrat | beef<br>- hamburger<br>- stew<br>- roast<br>- liver<br>pork<br>- bacon<br>- chops<br>- ribs<br>- roast | char<br>whitefish<br>trout | chicken<br>ptarmigan<br>turkey<br>goose<br>duck | chicken<br>duck | milk<br>cheese<br>yogurt |

Practice the sentence pattern from Student Activity 1.
e.g., (Bacon) comes from an animal.

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Prepare and eat a food from an animal. | Ask parents or older students to help. Have each student make and eat an Eggtopus as follows:<br>Eggtopus<br>For the body use half a hard cooked egg. cut 8 wiggly legs from a cheese slice. Arrange on a plate and place body on top. Make eyes from pieces of dried meat or sausage. Use a pepperoni slice for the nose. Attach eyes and nose to the head with toothpicks.<br><br>(Adapted from the Egg Marketing Board materials) |

**NUTRITION**

GRADE: 1 LESSON: 3 THEME: FOOD CLASSIFICATION

CONCEPT: FOODS ARE CLASSIFIED INTO FOUR FOOD GROUPS

PREPARATION:
1. Samples of different foods from each of the four food groups
2. Prepare individual food cards (Activity Sheets N5A and 5B)
3. Prepare a chart and sentence strips for Student Activity 3
4. Prepare copies of Food Groups Worksheets (Activity Sheets N6A, 6B, 6C)
5. Scissors and glue

VOCABULARY: groups, belongs

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) name the four food groups | Students:<br>1. Sort food samples into four related groups. | Background information: Page —<br>Have a number of different food samples placed randomly on a table. Samples should include items from each of the four food groups:<br>e.g., Bannock, Bread and Cereal<br>- bread, bannock<br>- rice<br>- spaghetti<br>- muffin<br>- cornflakes<br>Fruit and Vegetables<br>- apple<br>- celery<br>- banana<br>- carrot<br>- berries |

**N3.13**

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Meat, Fish, Birds and Eggs<br>- meat<br>- fish<br>- peanuts<br>- chicken<br>- eggs<br>Milk and Milk Substitutes<br>- milk<br>- cheese<br>- yogurt<br>- ice cream<br>Explain to students that you want to sort the food into four groups, so that similar foods go together (students will probably have most problems with nuts and eggs, which go with the meat samples).<br>**Retain these food samples for use with the next lesson.** |
| | 2. Name the four food groups. | The four food groups are:<br>- the Milk Group (Milk and Milk Substitutes)<br>- the Bread Group (Bannock, Bread and Cereals)<br>- the Meat Group (Meat, Fish, Birds and Eggs)<br>- the Fruit and Vegetables Group |

**OBJECTIVES**

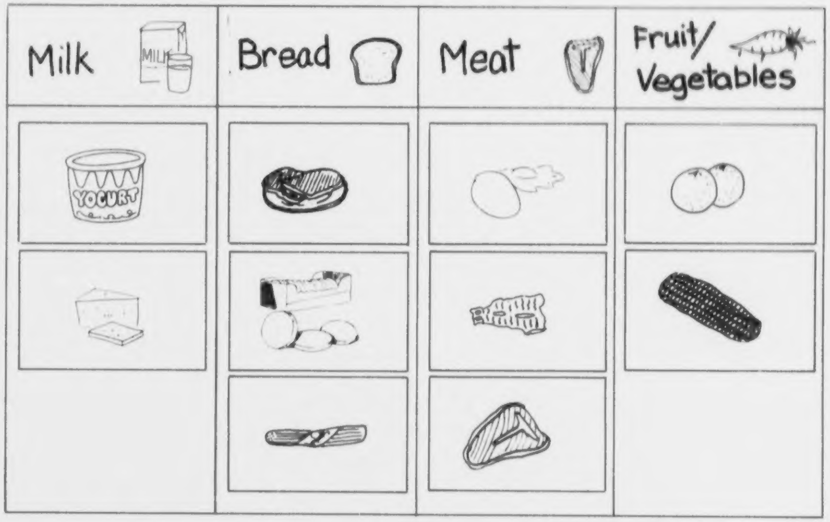
ii) identify a variety of foods that belong to each food group

**STUDENT ACTIVITIES**

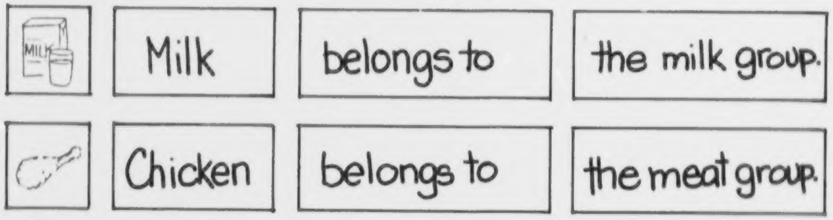
3. Name the food groups to which specific foods belong.

**TEACHER NOTES**

Refer to Activity Sheets N5A and N5B.
Prepare individual cards using the foods on the Food Groups Sheets. Make a large chart as illustrated.


Milk
MILK
Bread
Meat
Fruit/
Vegetables
YOGURT

Then have students place their food cards in a pocket chart using the sentence pattern as illustrated.


MILK
Milk
belongs to
the milk group.
Chicken
belongs to
the meat group.

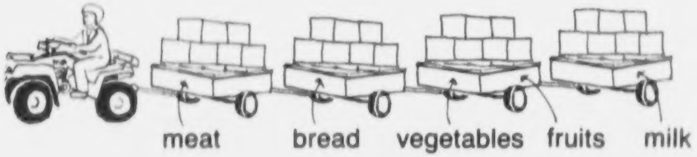
OBJECTIVES

STUDENT ACTIVITIES

4. Match a variety of foods to their food groups.

TEACHER NOTES

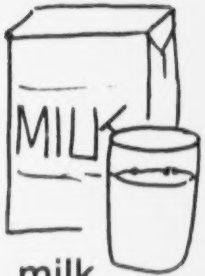
Refer to Activity Sheets N6A, 6B, and 6C.
Provide each pair of students with one copy of each Activity Sheet N6A and 6C. Provide each pair with four copies of Activity Sheet N6B. Students cut out the four wheeler and the four wagons. They label each wagon with the name of a food group. Then they cut out each food and sort it into the appropriate wagon. Foods are then glued onto the wagons and a "train" assembled from the four wheeler and wagons.

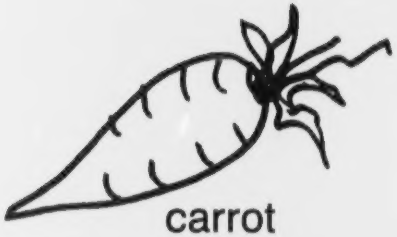


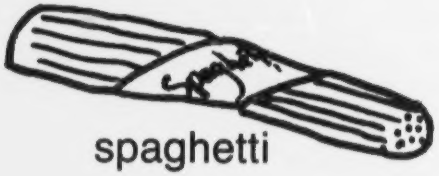
These will be coloured in the next lesson. Then display in the school, nursing station, stores and other public places.

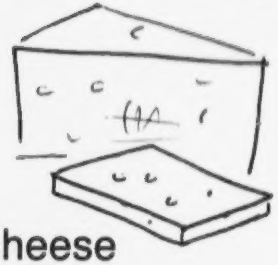
# FOOD GROUPS

N5A


milk


carrot


spaghetti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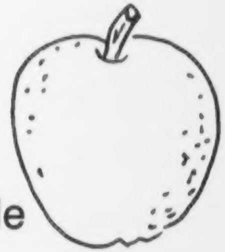
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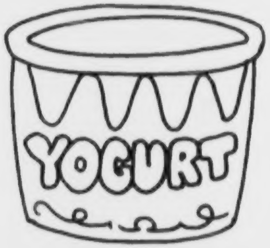

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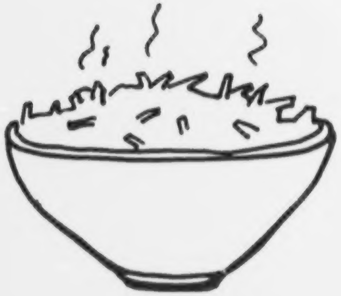
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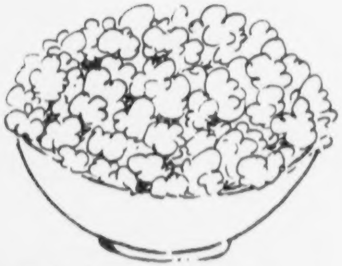
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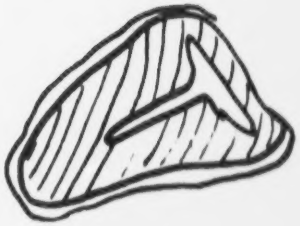
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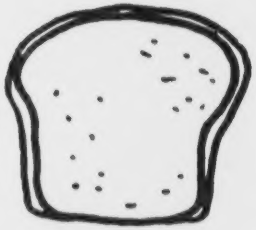
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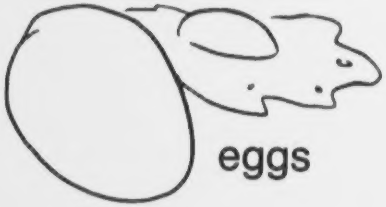
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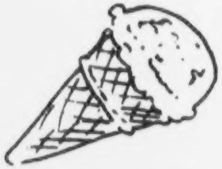
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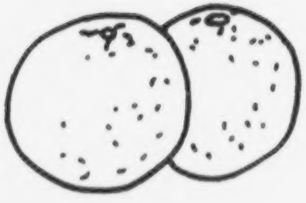
# FOOD GROUPS

N5B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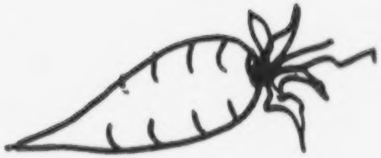
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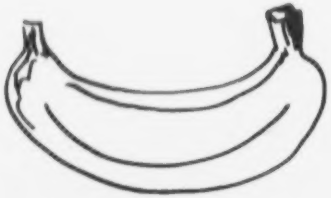
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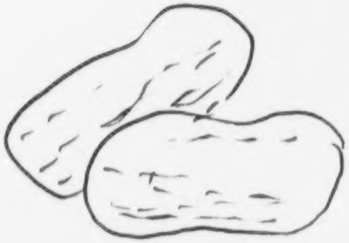
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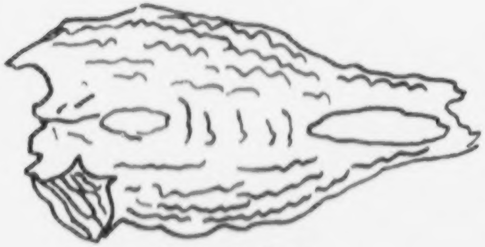
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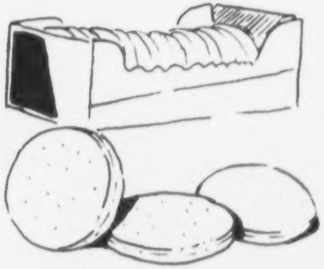
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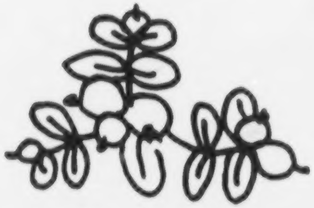
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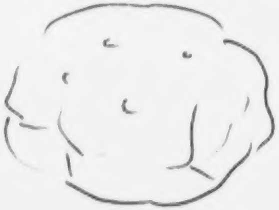
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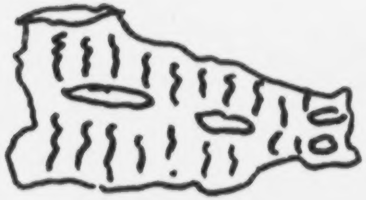
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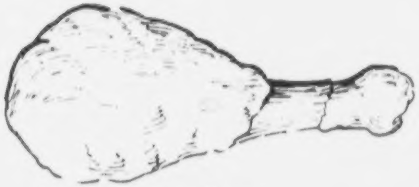
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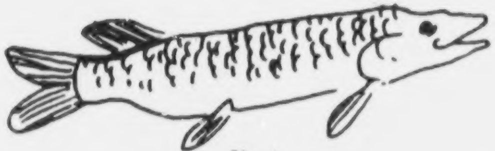
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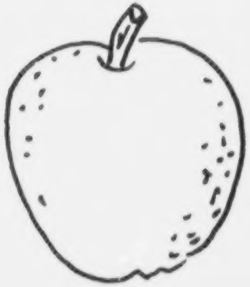
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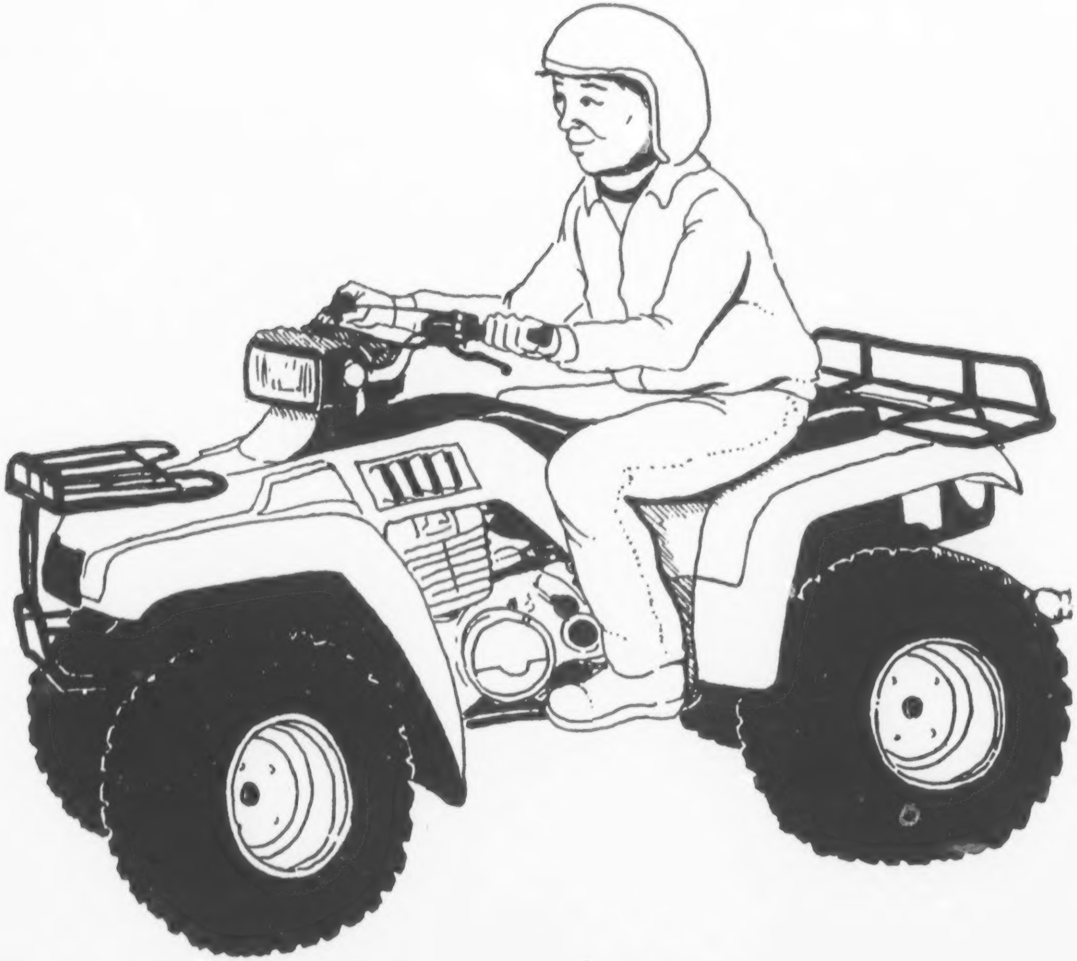
# FOOD GROUPS

N6A



# FOOD GROUPS

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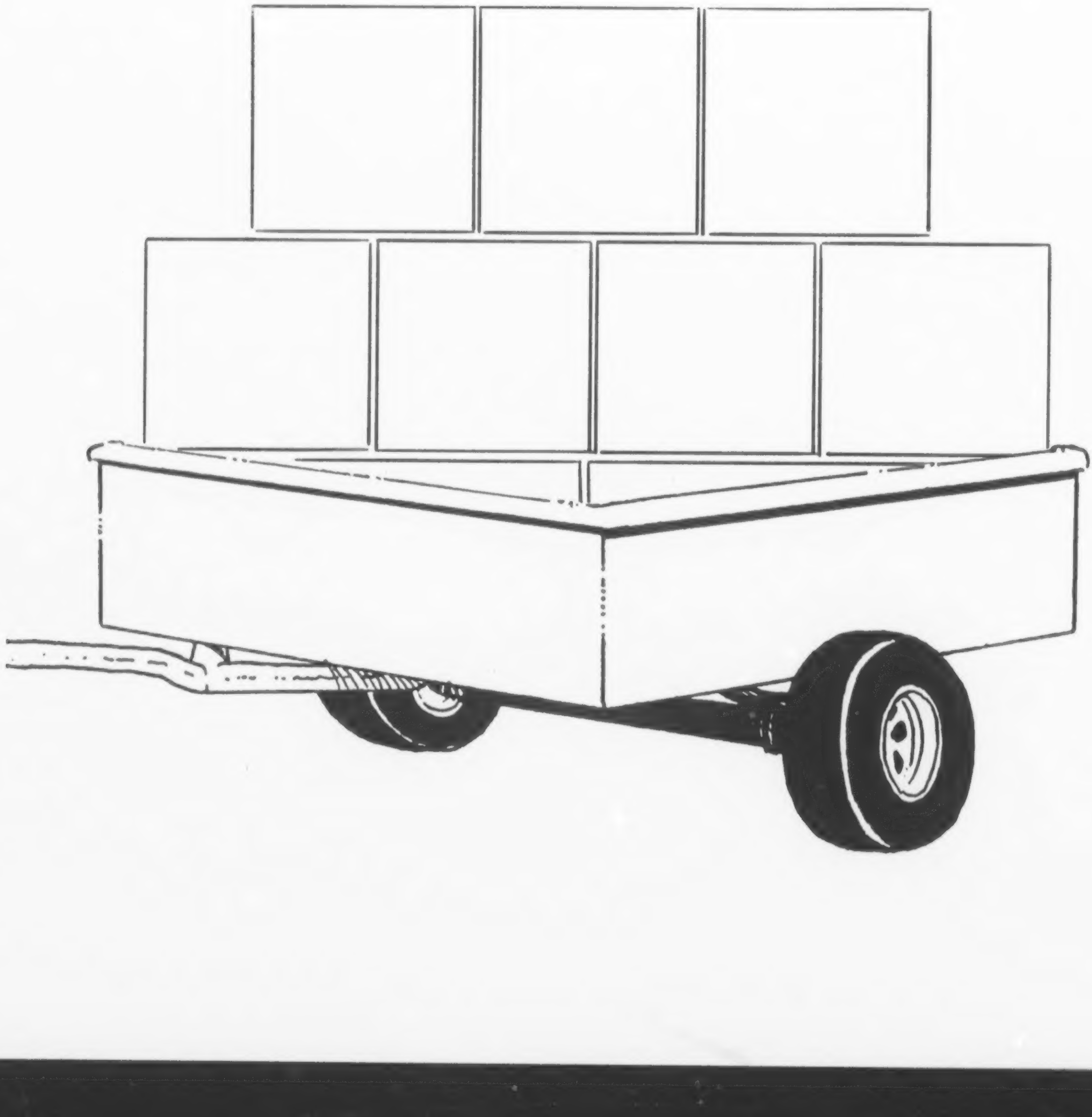

# FOOD GROUPS

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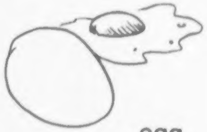
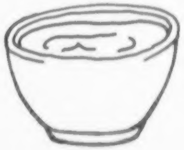
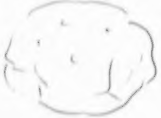
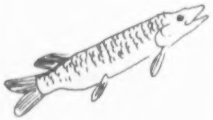
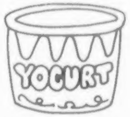
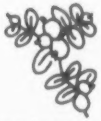
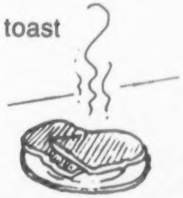
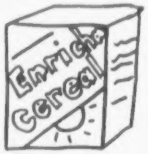
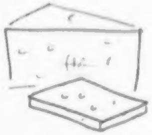
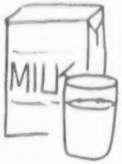
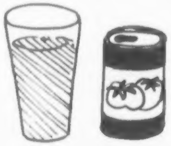
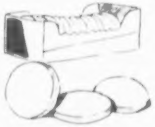
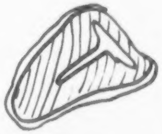
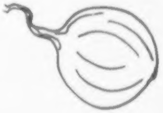
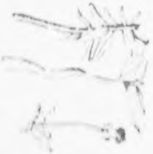
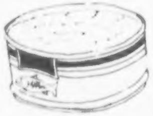
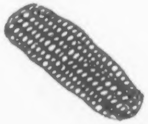
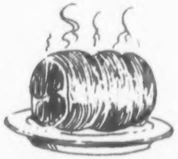
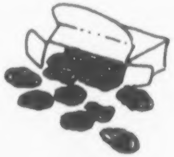
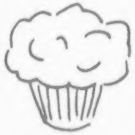
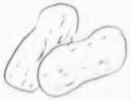
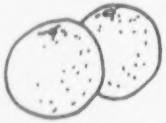
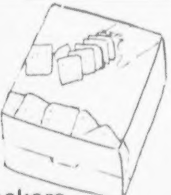
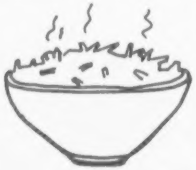
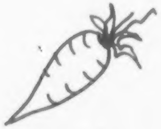
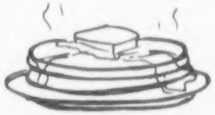
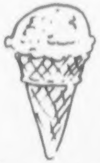
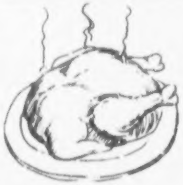
|  egg |  pudding |  bannock |  fish |  |  berries | toast  |
|   Enriched cereal |  cheese |  |  tomato juice |  pilot biscuits |  chop |  onion |
|  wild greens |  fish |  corn |  roast |  raisins |  muffin |  nuts |
|  oranges |  crackers |  rice |  carrots |  pancakes |  ice cream |  duck |

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**NUTRITION**

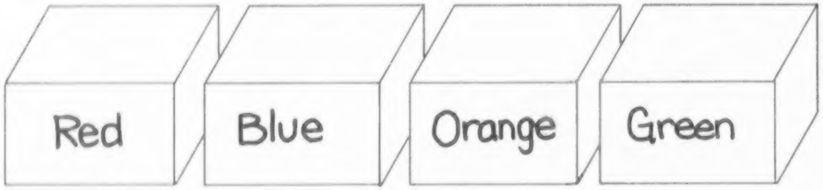
GRADE: 1 LESSON: 4 THEME: FOOD CLASSIFICATION

CONCEPT: FOODS ARE CLASSIFIED INTO FOUR FOOD GROUPS

PREPARATION:
1. Four cardboard boxes, coloured construction paper and crayons (red, blue, orange, green), scissors
2. Food samples from Lesson 3 and samples of non-nutrition foods
3. Prepare a class set of Food Groups worksheet (Activity Sheet N6C) and We Are The Food Groups song (Activity Sheet N7)
4. Prepare a class set of Foods That Are Good For You worksheets (Activity Sheet N8)
5. Prepare a class set of the Good Food Song (Activity Sheet N9)

VOCABULARY: nutritious

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) match each food group to its colour code | Students:<br>1. Name the colours of the four food groups. | Background information: Page —<br>Food groups are represented by the following colours:<br>Blue - Milk and Milk Substitutes<br>Red - Meat, Fish, Birds and Eggs<br>Green - Fruit and Vegetables<br>Orange - Bannock, Bread and Cereal<br>Show students cards coloured red, green, orange and blue. Ask them to identify the colours. Explain that each colour represents a food group. Use the sentence patterns: |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | The milk food group is blue .<br>Is the food group ____ ?<br>No. It is not ____ . It is ____ .<br>Yes it is ____ . |
| | 2. Sort foods according to the proper colour for each food group. | Display four cardboard boxes covered with construction paper.<br><br> <br>Use the food samples from Lesson 3, Student Activity 1. Ask students which box each food belongs in. Have them respond using the sentence pattern:<br>(Peanuts) go(es) in the red box.<br>Place the food in the boxes as instructed by students. |

<table>
<tr><th>OBJECTIVES</th><th>STUDENT ACTIVITIES</th><th>TEACHER NOTES</th></tr>
<tr><td></td><td>3. Match foods with their food group colours.</td><td>Refer to Activity Sheet N6C from Lesson 3.<br>Give each pair of students four squares of construction paper or have them colour squares of paper and arrange them on a desk as shown.
<table>
<tr><td>Red</td><td>Orange</td></tr>
<tr><td>Green</td><td>Blue</td></tr>
</table>
Have students cut out the foods on Activity Sheet N6C and sort them onto the appropriate squares.</td></tr>
<tr><td></td><td>4. Match food groups with their colours.</td><td>Have students colour the wagons on the food "trains" made in Lesson 3, Student Activity 4.</td></tr>
<tr><td></td><td>5. Learn and sing "We Are The Food Groups" song.</td><td>Refer to Activity Sheet N7.</td></tr>
<tr><td>ii) identify foods that do not belong to any food group</td><td>6. Name foods that do not belong to any food group.</td><td>Display samples of food including some non-nutritious foods. Explain to students that some foods are good for them and help them to grow healthy and strong. These foods belong to the four food groups. Others are not good for them (they do not belong to any of the four food groups). Ask students to pick out from the samples, foods that are not good for them. Common examples include:</td></tr>
</table>

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | - pop<br>- mustard<br>- ketchup<br>- gravy<br>- pie<br>- potato chips<br>- jams, jellies<br>- jello<br>- candy<br>- chocolate bars<br>- donuts<br>Emphasize that foods that belong to the four food groups are nutritious or healthy. Foods that do not belong to any food group are not. |
| | 7. Complete the Foods That Are Good For You worksheet. | Refer to Activity Sheet N8.<br>Have students circle the foods which are good for them. |
| | 8. Learn and sing "The Good Food Song..." | Refer to Activity Sheet N9. |

# WE ARE THE FOOD GROUPS

N7

Whole class

We are the food groups.
We are the food groups —
Red and orange, green and blue.
We are the food groups.
We are the food groups.
We keep you healthy. Yes we do.

4 groups

We are the red group.
We are the red group —
Meat and Fish and Birds and Eggs.
We are the red group.
We are the red group —
Meat and Fish and Birds and Eggs.

We are the blue group.
We are the blue group —
Milk and cheese and ice cream too.
We are the blue group.
We are the blue group —
Milk and cheese and ice cream too.

We are the orange group.
We are the orange group —
Bannock, Bread and Cereal.
We are the orange group.
We are the orange group —
Bannock, Bread and Cereal

We are the green group.
We are the green group —
Fruit and Veggies is our name.
We are the green group.
We are the green group —
Fruit and Veggies is our name.

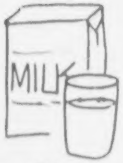
Whole class repeat first verse.
Yell, "YES WE DO!" in last line.

(Tune: La Cucaracao)
*Barbara Hall*

# FOODS THAT ARE GOOD FOR YOU

N8

Circle the foods that are good for you.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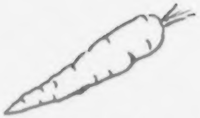
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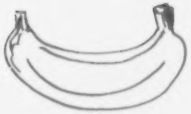
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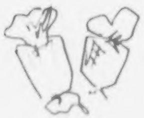
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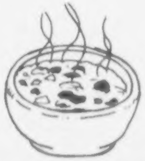
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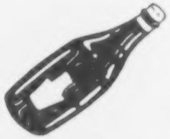
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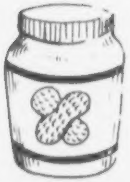
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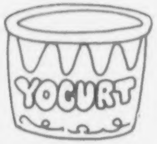
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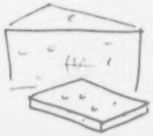
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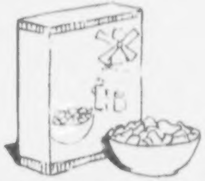
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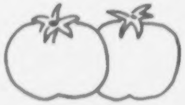
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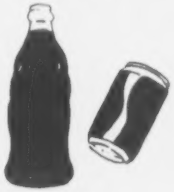
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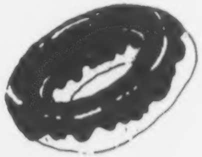
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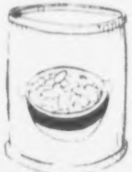
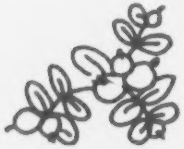
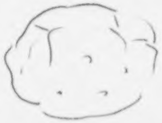
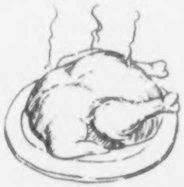

baked beans


cranberries


bannock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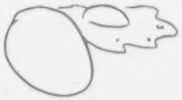
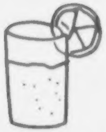

eggs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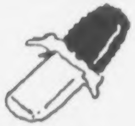
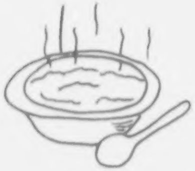

chocolate bar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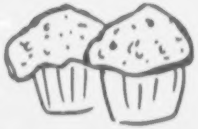
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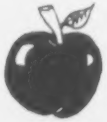
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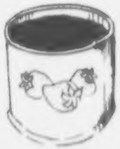
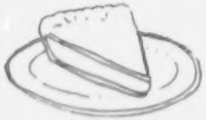

jam, jelly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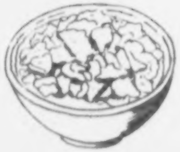
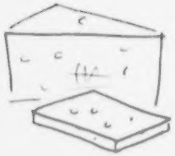
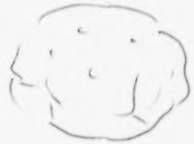

cold unsweetened cereal

# THE GOOD FOOD SONG

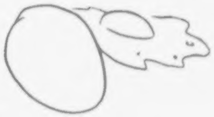
Milk and cheese are good
for you,
Good for you, good for you.
Milk and cheese are good
for you.
Pop and chips are not!



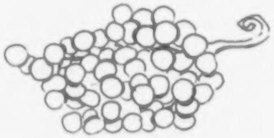
Fish and meat are good for
you,
Good for you, good for you.
Fish and meat are good for
you,
Donuts and cake are not!



Eggs and bannock are good
for you,
Good for you, good for you.
Eggs and bannock are good
for you,
Candy and chocolate are
not!



Apples and grapes are good
for you,
Good for you, good for you.
Apples and grapes are good
for you,
Jello and jams are not!



(Tune: London Bridge is Falling Down)

*Helen Balanoff*

**NUTRITION**

GRADE: 1 LESSON: 5 THEME: FOOD SELECTION

CONCEPT: A VARIETY OF FOODS FROM EACH FOOD GROUP IS NEEDED DAILY

PREPARATION:
1. Write out the Bannock is Nice poem (Activity Sheet N10)
2. Ingredients for a nutritious snack
3. Prepare a class set of the Healthy Snacks worksheet (Activity Sheet N11)
4. A picture of a baby

VOCABULARY: snack, breakfast, lunch, supper, dinner, morning, noon, evening, meal, healthy

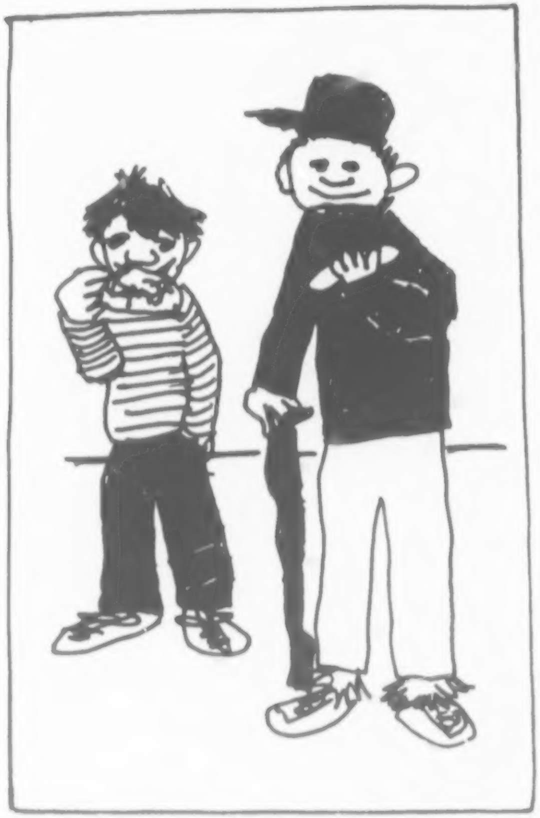
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background information: Page — |
| i) give examples of nutritious foods from each food group | 1. Listen to the Bannock is Nice poem. | Refer to Activity Sheet N10.<br>Read the poem and explain to students that James really likes bannock. |
| | 2. Name their favourite healthy foods. | Students will understand the word "healthy" but may not understand "nutritious". Have each student identify his/her favourite healthy food using the sentence pattern:<br>My favourite healthy food is (cheese).<br>Other students can rub their stomachs and say "Yum, yum, yum!" The teacher should record them. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 3. Classify the favourite foods into the four food groups. | Each student now has to decide which food group the food belongs to. Have students use the sentence pattern:<br>Mary: (Cheese) belongs to the (Milk Group) |
| ii) give examples of nutritious snacks | 4. Talk about when they eat in their family. | Many students, especially those from families where one adult is working, will identify:<br>- morning meal * (or breakfast)<br>- noon meal * (or lunch)<br>- evening meal * (or dinner/supper)<br>- snacks (food eaten between main meals)<br>(* English equivalent of the words used in one of the native languages)<br>The concept of snacking will vary greatly between families and cultures. In some cases food will always be available for continuous snacking. In others a snack will be one food item eaten after school. Depending on what food is eaten, the snacks may be either nutritious or non-nutritious. |
| | 5. Explain what a healthy snack is. | Provide students with a healthy snack, e.g. pilot biscuits and peanut butter.<br>Tell students that it is a healthy snack and explain that a healthy snack is something we generally eat between meals from one or more of the four food groups. |
| | 6. Name various foods that can be used as healthy snacks. | Snack foods are generally ready to eat, requiring little or no preparation. Healthy snacks include:<br>- fruit, e.g., apple or berries<br>- vegetables, e.g., carrot<br>- nuts<br>- milk<br>- fruit juice<br>- crackers<br>- peanut butter<br>- cheese slices<br>- cheese<br>- dried meat, dried fish<br>- dried fruits |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 7. Choose snacks that are healthy. | Refer to Activity Sheet N11.<br>Have students circle the snacks that are healthy. |
| iii) explain why it is important to eat a variety of foods from each food group daily | 8. Explain what might happen if they didn't eat a variety of foods from each food group daily. | Show students the picture of a baby. Have students talk about what a baby eats (milk or formula). As the baby grows older, it starts to eat other things because milk doesn't give it everything it needs to grow. Ask students what would happen if they ate e.g., only apples. They would eventually get sick. We need food from each food group to make us grow healthy and strong. |

# BANNOCK IS NICE

My mom cooks bannock.
Bannock is nice.
I eat it.
I put butter on it.
My grandfather eats it too.
My mother eats it too.
My granny eats it too.
Bannock sure is good.

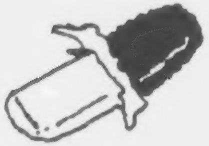


. . .James Simpson of Mezi Community School in Lac La Martre

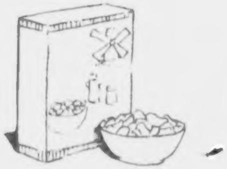
# HEALTHY SNACKS

N11

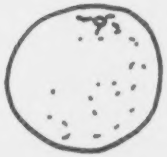
Circle the snacks that are good for you.



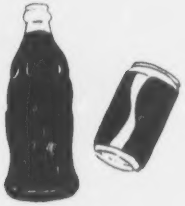
chocolate bar



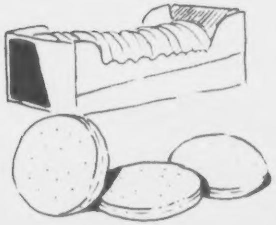
potato chips



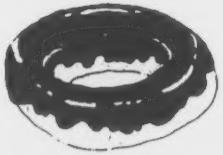
orange



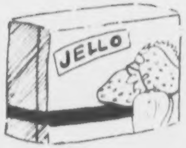
pop



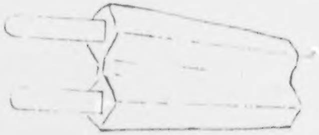
pilot biscuit



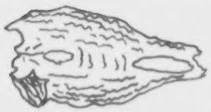
donuts



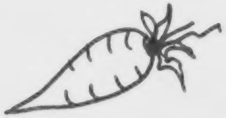
jello



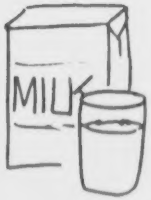
popsicle



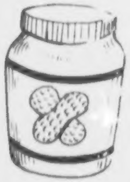
dried fish



carrots



milk



peanut butter

**NUTRITION**

GRADE: 1 LESSON: 6 THEME: FOOD SELECTION

CONCEPT: A VARIETY OF FOODS FROM EACH FOOD GROUP IS NEEDED DAILY

PREPARATION:
1. Prepare a food card for each food mentioned in the Start The Day Stories (Activity Sheet N12)
2. Prepare a chart for Student Activity 2
3. Drawing materials
4. Prepare a class set of the Start The Day The Healthy Way worksheet (Activity Sheet N13)

VOCABULARY: breakfast, morning meal

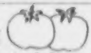
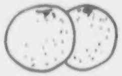
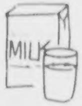
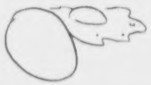
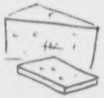
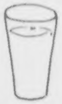
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background information: Page |
| i) describe a healthy way to start the day | 1. Listen to the Start the Day stories. | Refer to Activity Sheet N12.<br>Prepare food cards for each food each person in the story has, i.e., <br>Read the morning meal stories to the students. Show them the food cards for each person. Ask them to decide who chose a healthy way to start the day. Have them explain why (Jimmy, Martha and Susie had a healthy morning meal). |
| | 2. Describe what is meant by a healthy way to start the day. | A healthy way to start the day consists of foods from at least three food groups. |

OBJECTIVES

STUDENT ACTIVITIES

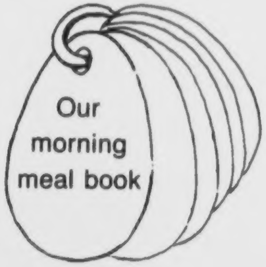
TEACHER NOTES

Use the food cards from Activity 1 to check and see which morning meals were healthy. Record on an experience chart.

| person | milk | fruit vegetables  | bread | meat |
|---|---|---|---|---|
| Mary | |  | | |
| John |  | | |  |
| Jimmy |  |  | | |

3. Draw their favourite healthy morning meal.

Have each student draw their favourite healthy morning meals. Make the drawings into a class morning meal (breakfast) book.

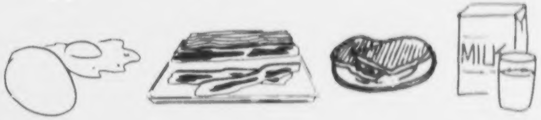


| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) select nutritious foods to start the day | 4. Describe a healthy morning meal given one healthy food. | Give students the name of a healthy food to start the day.<br>Have students complete the healthy morning meal by adding food items from two or three other food groups. Examples of a healthy food to start with are: bannock, juice, or peanut butter. |
| | 5. Complete the Start the Day the Healthy Way worksheet. | Refer to Activity Sheet N13.<br>Have students select a healthy start to the day from the foods on the sheet. They should colour the foods they choose and ensure they have one from at least three food groups. |

# START THE DAY STORIES

N12

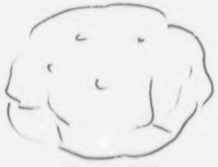
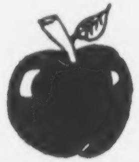
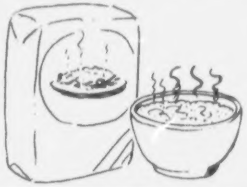
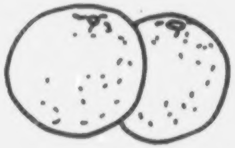
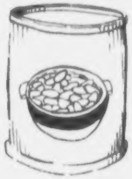
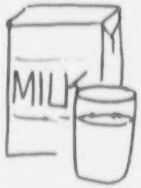
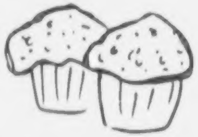
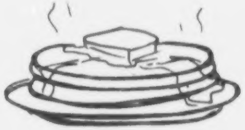
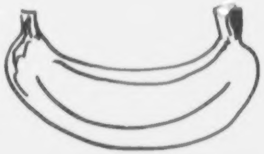
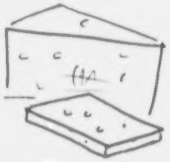
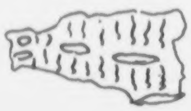
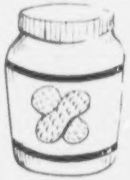
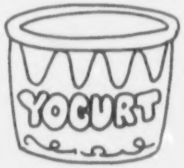
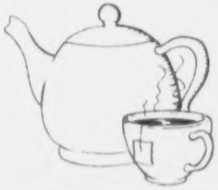
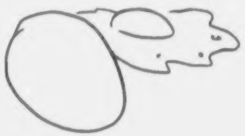
To start the day;

1. Mary had an apple.
2. John had milk and a cookie.
3. Jimmy had orange juice, bannock and cheese.
4. Martha had bread and peanut butter and milk.
5. Susie had an egg and bacon and toast and milk. 
6. Sam had cornflakes and milk.
7. Jo had a pilot biscuit and tea.

# START THE DAY THE HEALTHY WAY

N13

Check (✓) three to four foods to start the day.
Colour each food.

| | | | | |
|---|---|---|---|---|
|  Bannock |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Do you have ☐ a red?
☐ a blue?
☐ a green?
☐ an orange?

## NUTRITION

GRADE: 1 LESSON: 7 THEME: FOOD APPRECIATION

CONCEPT: A WILLINGNESS TO SELECT FAMILIAR AND UNFAMILIAR FOODS PROMOTES FOOD APPRECIATION

PREPARATION:
1. Ingredients for a nutritious breakfast
2. Prepare a class set of the Start Your Day Song (Activity Sheets N14)

VOCABULARY:

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) prepare nutritious foods to start the day | Students:<br>1. Prepare nutritious foods which can be eaten to start the day. | Background information: Page—<br>Ask parents or older students to help.<br>Examples of healthy morning meals which students might prepare include:<br>- bannock, cheese and fruit juice<br>- fruit juice, eggs and toast<br>- porridge, milk and dried or fresh fruit<br>- muffin, milk and fruit<br>- pancakes, milk and fruit<br>(Refer to "Muskox Milk, Ptarmigan Pie and Other Northern Delicacies — Kids Can Cook" for recipes. It's in your school.) |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) demonstrate a willingness to taste nutritious food to start the day | 2. Eat the healthy food which they prepared to start the day. | |
| iii) state the importance of nutritious food to start the day | 3. Explain why it is important to start the day with healthy food. | Ask students why they think it is important to start the day with healthy food. Record student responses on an experience chart using the sentence pattern as illustrated.<br>It is important to start the day with healthy food because ______.<br>Responses should include:<br>- it is the first food of the day.<br>- we haven't eaten for 12 - 14 hours.<br>- it gives us energy for school.<br>- we won't be hungry later on if we start the day with healthy food. |
| | 4. Learn and sing the Start Your Day song. | Refer to Activity Sheet N14. |

# HEALTHY FOOD SHOULD START YOUR DAY

N14

Healthy food should start your day, start your day, start your day
Healthy food should start your day,
It helps you work and play.

Healthy food should start your day, start your day, start your day
Healthy food should start your day,
It helps you grow up strong

Healthy food should start your day, start your day, start your day
Healthy food should start your day,
It keeps you feeling good.

(Tune: London Bridge is Falling Down)

*Helen Balanoff*

# GRADE 1

# TEACHER BACKGROUND INFORMATION

# NUTRITION

## FOOD

Food is life. People, animals and plants need food to grow and remain healthy. The substances in food that help people grow and stay healthy are called nutrients.

## NUTRIENTS

We need over 50 nutrients for good health. These nutrients have their own jobs to do, but often depend on each other. Because foods are different they give us different nutrients. No one food can provide all the nutrients we need. This means we must eat a variety of foods every day.

From food we also get energy to carry out daily activities. The energy comes from fats, carbohydrates and protein. If food gives more energy than needed, the extra energy is stored as fat.

If not enough energy comes from food, then the body loses weight. So, food energy must be balanced with activity to control body weight.

Although there are more than 50 nutrients essential for health and growth, there are only six major groups of nutrients:

| **Nutrient:** | **Function:** |
|---|---|
| 1. Protein | builds and repairs body tissue, e.g., muscles, skin |
| 2. Fat | insulates and protects<br>supplies energy<br>carries vitamins A, D, E and K |
| 3. Carbohydrates | important source of energy |
| 4. Vitamins | Vitamin A: good night vision, healthy skin<br>Vitamin C: healthy gums, teeth & blood vessels<br>fights infection<br>B vitamins: help the body use energy<br>(Riboflavin)<br>(Thiamin)<br>(Niacin) |
| 5. Minerals | Calcium: strong bones & teeth<br>Iron: good blood |
| 6. Water | regulates body functions |

### What Foods Do We Eat To Get All These Nutrients?

Traditionally, people in the North ate a healthy diet. The hunting and fishing lifestyle was active and healthy. There were times of little food, but generally people were able to feed themselves well. People wasted very little of their food sources. For example, they would eat all of an animal they killed; the eyes, brains, lips, stomach contents, etc. That way they were able to get all the nutrients they needed. Today, lifestyle and food sources in the North have changed. Both store and country foods are needed for good health and nutrition. The stores have many nutritious foods, but also some that aren't so nutritious. People need to choose foods carefully for best nutrition and value for their money.

Here's a list of foods, from the country and the store, that will give people the nutrients that they need everyday.

| Nutrient | Country Food Source | Store Food Source |
|---|---|---|
| Protein | Wild game (all parts of the animal),wild birds, wild bird eggs, animal blood, fish, fish eggs, organ meats (liver, kidney, heart) | Beef, pork, chicken, turkey, organ meats, fish, dried beans and peas, cheese, eggs, nuts/seeds, peanut butter |
| Carbohydrate | Bannock, wild berries and greens, seaweed, animal stomach contents | Bread, whole grain cereals, enriched pasta (macaroni noodles, etc.), rice, dried beans and peas, macaroni dinner, crackers, pilot biscuits |
| Fat | Wild birds, wild game fat, muktuk, animal intestines | Beef, pork, luncheon meats, bologna, sausages, bacon, nuts/seeds, wieners, lard, butter, margarine |
| Calcium | Animal stomach contents, fish heads and bones, seaweed/kelp, wild dark green vegetables, bones, wild milk | Milk, cheese, yogurt, sunflower seeds, broccoli, dried beans/peas, canned fish with bones (salmon, sardines) |
| Iron | Game, wild birds, organ meats, seaweed, animal blood, wild greens | Organ meats, red meats, pumpkin seeds, green leafy vegetables, enriched cereal products, enriched pasta (macaroni, noodles, etc.) |
| Vitamin C | Wild greens, wild berries, seaweed | Potatoes, cabbage, broccoli, turnip, canned tomatoes, alfalfa and bean sprouts, oranges, orange and grapefruit juice, vitaminized apple juice |
| Vitamin A | Seal, wild birds, muktuk, animal stomach contents, seaweed, animal and fish liver, wild greens and berries | Broccoli, spinach, milk, butter, liver, carrots, squash |
| Vitamin D | Fish liver oils | Vitamin D fortified milk |
| Thiamin | Seal, wild birds, organ meats, muktuk, seaweed, bannock, wild greens | Dried beans/peas, pork, organ meats, nuts/seeds, enriched bread/cereals, enriched pasta (macaroni, noodles, etc.) |
| Riboflavin | Game, wild birds, stomach contents, organ meats, wild bird eggs, seaweed, bannock | Milk products, organ meats, enriched breads, cereals, enriched pasta (macaroni, noodles, etc.) |

**N60**

| Nutrient | Country Food Source | Store Food Source |
|---|---|---|
| Niacin | Animal stomach contents, seaweed, bannock, organ meats, wild game, wild birds | Organ meats, enriche<br>enriched breads and<br>(macaroni, noodles, e |

As shown in the above list, some foods provide more than one nutrient. Example: Wild game provides protein, fat, iron, vitamin A, thiamin and riboflavin. Also, some foods are the main source of more than one nutrient. Example: fortified milk is a main source of calcium, and it is also a main source of Vitamin D.

The Food Guide (Canada's Food Guide or the N.W.T. Food Guide), puts food together into four food groups, based on the leader nutrients they provide. By selecting foods from EACH group daily we can be sure of getting all the nutrients we need.

**Here's a summary of what each group provides us with:**

| | |
|---|---|
| Milk and milk substitutes group (includes soft bones) | Calcium, riboflavin, vitamins A and D, protein, fat, carbohydrate |
| Meat, fish, birds and eggs group | Protein, iron, fat, vitamin A, thiamin, riboflavin, niacin |
| Bannock, bread and cereal group | Carbohydrate, thiamin, riboflavin, niacin, iron, fibre, protein |
| Fruit and vegetables group (includes intestines and stomach contents) | Vitamins A and C, carbohydrate, fibre, iron. |

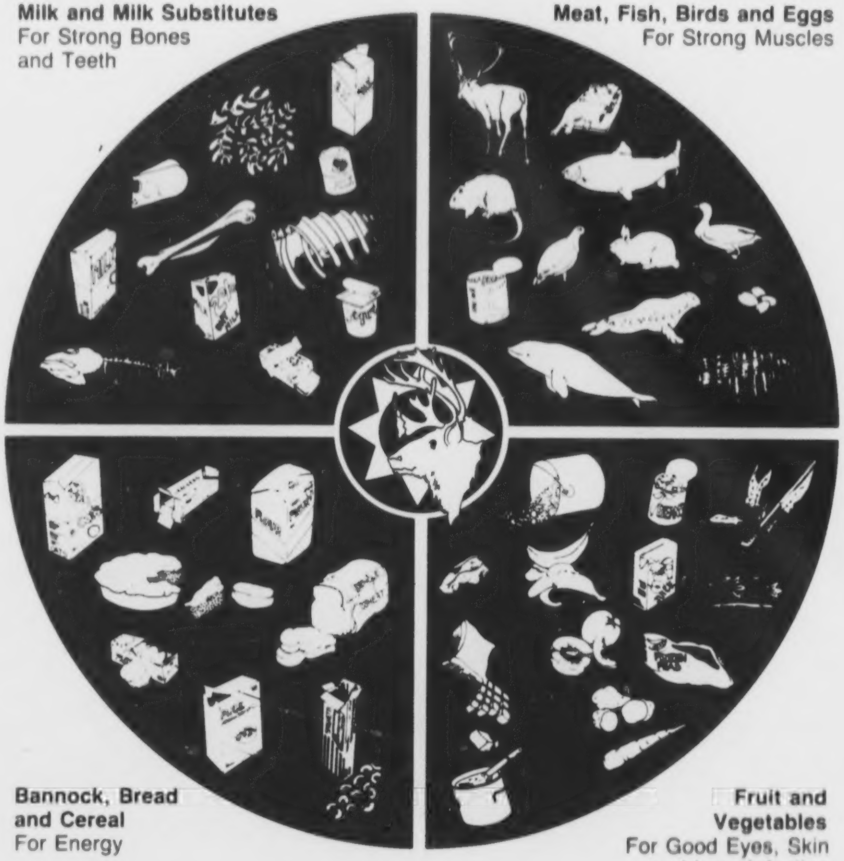
The food groups are colour coded to help people plan a healthy diet.

| | |
|---|---|
| Blue | Milk and milk substitutes |
| Red | Meat, fish, bird, eggs and all edible parts |
| Green | Fruit and vegetables |
| Orange | Bannock, bread and cereal |

This allows people to quickly identify a food with its food group, e.g., "Milk belongs to the blue group."

# N.W.T. FOOD GUIDE

## Eat foods from each group every day for health



**Milk and Milk Substitutes**
For Strong Bones
and Teeth

**Meat, Fish, Birds and Eggs**
For Strong Muscles

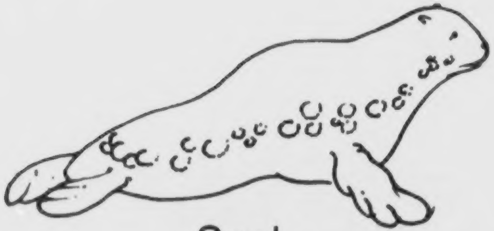
**Bannock, Bread and Cereal**
For Energy

**Fruit and Vegetables**
For Good Eyes, Skin
and Less Infection

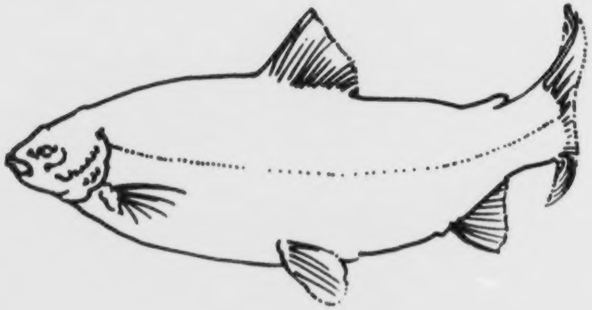
**N62**

# COUNTRY FOODS FROM THE MEAT, FISH, BIRDS AND EGGS AND ALL EDIBLE PARTS GROUP

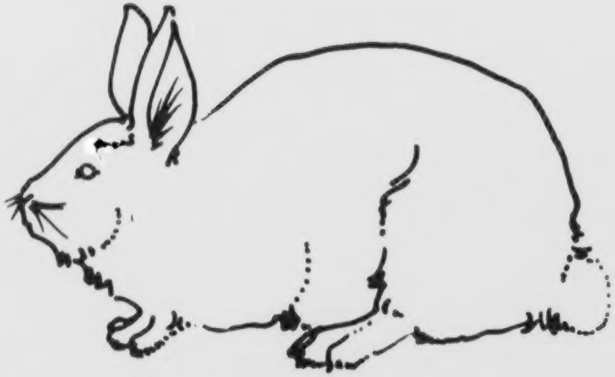
Leader Nutrients: Protein, Iron



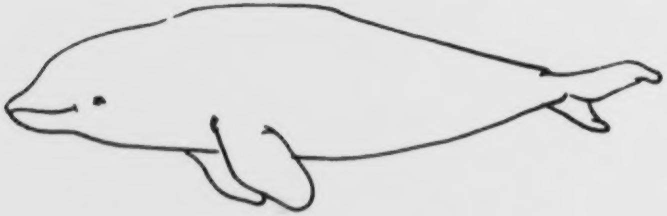
Seal



Fish



Rabbit



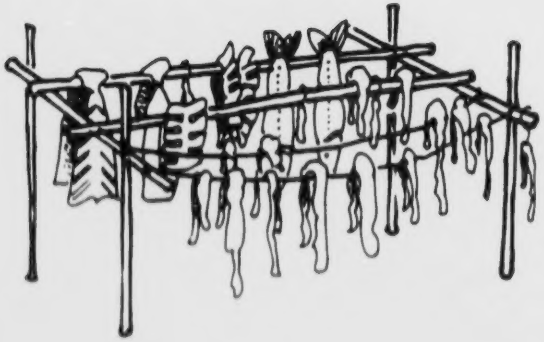
Whale

3.5

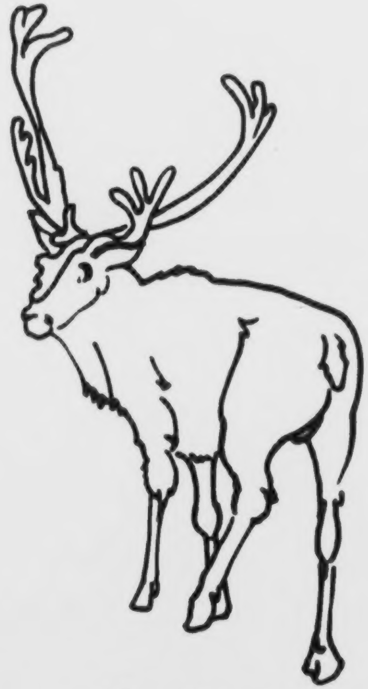
3.6

# COUNTRY FOODS FROM THE MEAT, FISH, BIRDS AND EGGS AND ALL EDIBLE PARTS GROUP

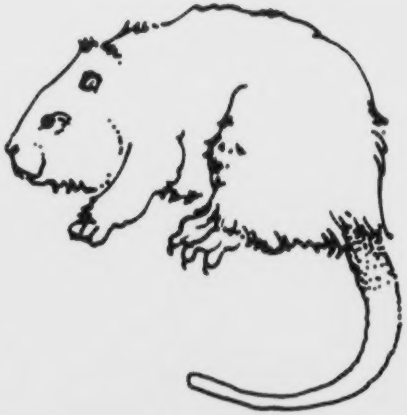
Leader Nutrients: Protein, Iron



Dried Meat and Fish



Caribou

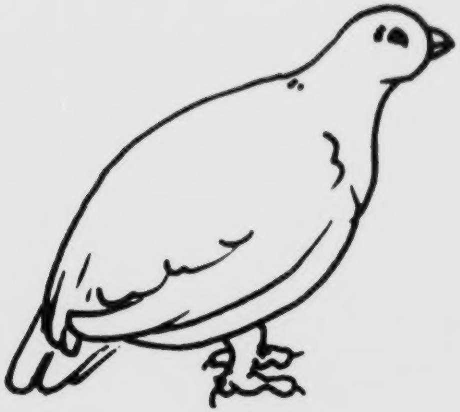


Muskrat

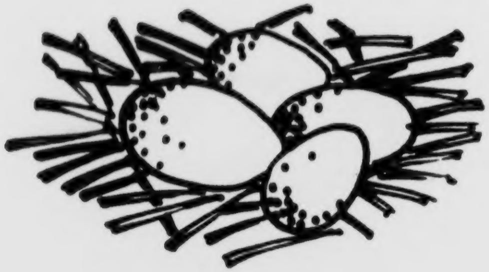
N64

# COUNTRY FOODS FROM THE MEAT, FISH, BIRDS AND EGGS AND ALL EDIBLE PARTS GROUP

Leader Nutrients: Protein, Iron



Ptarmigan



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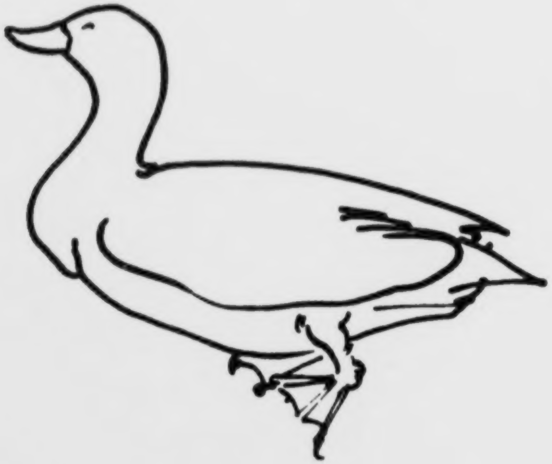

Duck

N65

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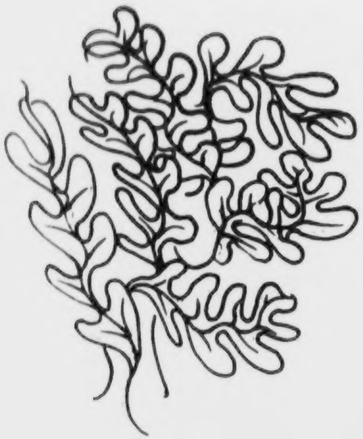
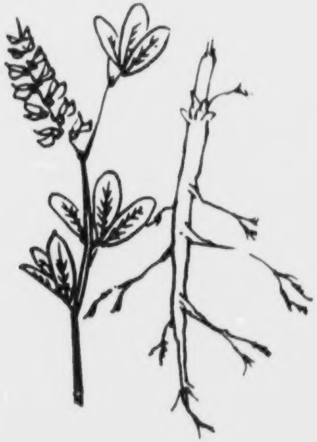
# COUNTRY FOODS FROM THE FRUIT AND VEGETABLES GROUP

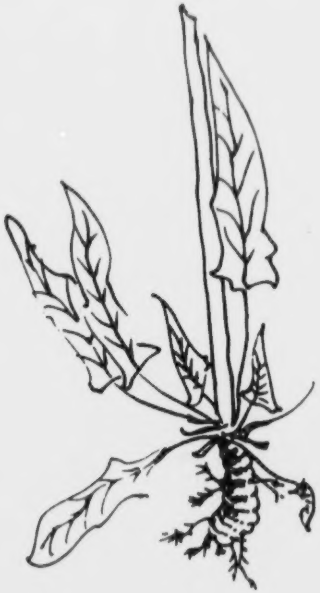
Leader Nutrients: Vitamin A, Vitamin C



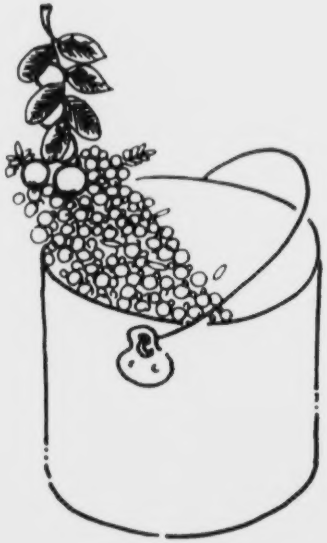
Seaweed



Clover



Dock

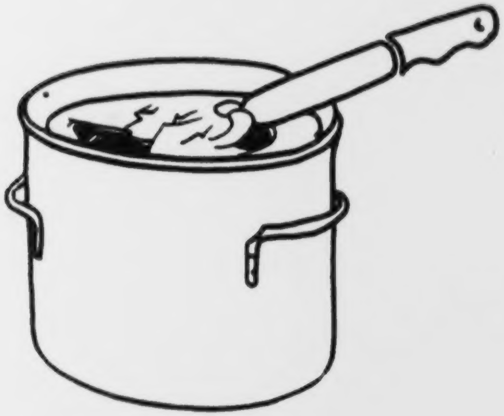


Berries

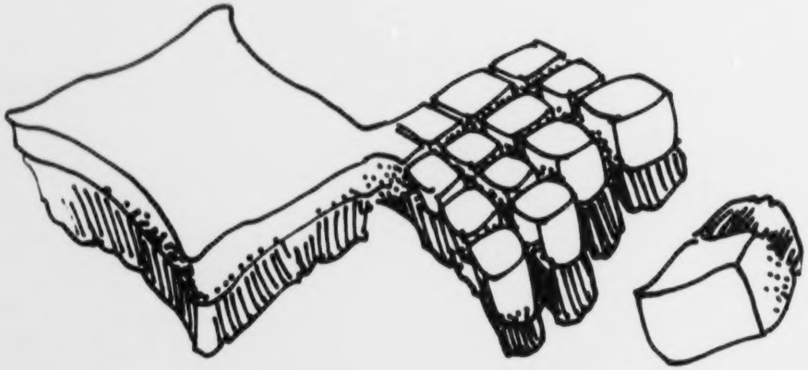
N66

# COUNTRY FOODS FROM THE FRUIT AND VEGETABLES GROUP

Leader Nutrients: Vitamin A, Vitamin C



Seal Fat



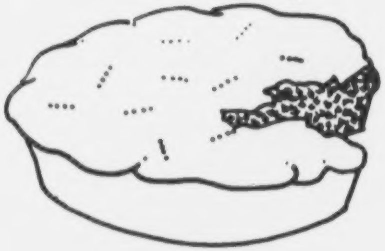
Muktuk

Even though these foods come from animals they are part of the Fruit and Vegetables Group because of their high vitamin content.

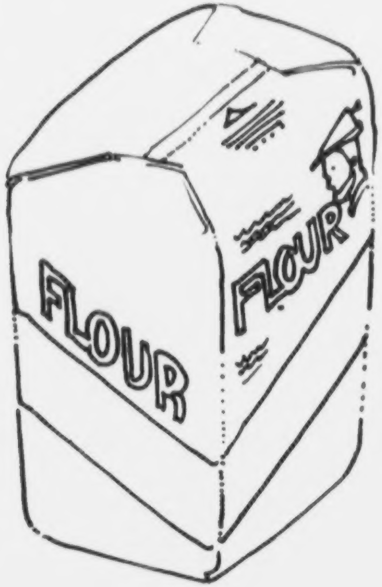
N67

# COUNTRY FOODS FROM THE BANNOCK, BREAD AND CEREAL GROUP

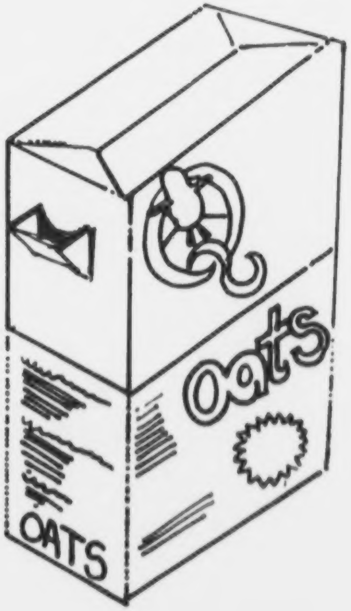
Leader Nutrient: Carbohydrates for Energy



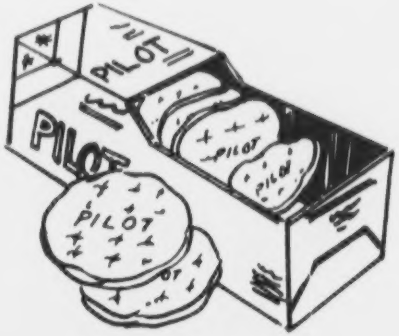
Bannock


FLOUR
FLOUR

Flour



Oats

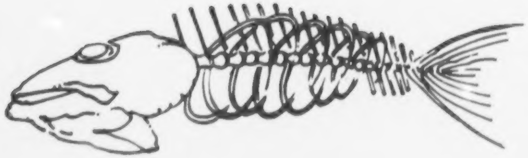

PILOT
PILOT
PILOT
PILOT

Pilot Biscuits

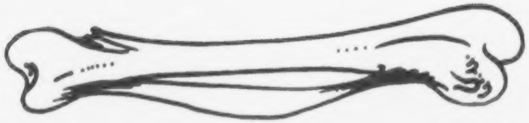
N68

# COUNTRY FOODS FROM THE MILK AND MILK SUBSTITUTES GROUP

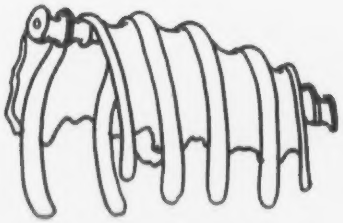
Leader Nutrient: Calcium



Fish Head and Bones



Leg Bone



Rib Bones

Even though these foods may seem like meat sources, they are part of the Milk and Milk Substitute Group because of their high calcium content.

## MEAL NAMES AND TIMES

Students may eat at different times depending on the circumstances within the home.

In homes where one or more adults work (in the wage economy), and where there are school age children it is likely that students will eat a:

morning meal - or breakfast
noon meal - or lunch
evening meal - or supper/dinner
- snacks

(The terms morning meal, noon meal and evening meal are English translations of the corresponding terms in Inuinaktun, and are similar in other native languages.)

However some students may eat at other times. In some homes, food is always available and people eat continuously throughout the day, without having main meals. Not everyone eats main meals before school, at noon hour and after school/work.

What is important is that people follow the N.W.T. Food Guide, in terms of recommended numbers of daily servings and sizes of these servings. If people snack continuously, it is important that these snacks be nutritious, and include varied food items from each food group. It is also important that students start the day with nutritious food. This gives them the energy they need for work and play and aids their concentration.

## WHY IT IS IMPORTANT TO START THE DAY WITH NUTRITIOUS FOOD

Many reasons are often given for skipping a morning meal. However, this is the most important food of the day. It ensures quick energy to start the day and lasting energy to carry out morning activities.

It can be any combination of foods, either solid or liquid, that supplies the nutrients needed by our bodies.

People who do not start the day with nutritious food usually fall victim to hunger pangs around coffee break time and opt for nutritionally-poor snacks such as doughnuts. They may soon get into the habit of eating high-calorie snacks, a practice which can lead to being overweight. Children who do not start the day with nutritious food have poor listening skills and are unable to concentrate on their work for long periods of time.

Nutritionally adequate food has the staying power to prevent hunger until the next meal, thus discouraging midmorning snacks and lunchtime extras. A nutritious morning meal consists of food from at least three of the four food groups.

Ref.: Nutrition Communications, Kellogg Salada Canada Inc.

## NON-NUTRITIOUS FOODS

Not all available foods can be classified into the four food groups. Such foods contain too few nutrients and/or too much sugar, salt and fat which can contribute to poor health. Other than providing energy (calories or joules), these foods have very few nutrients to help our bodies grow and be healthy.

The following two types of food do not belong in any group of the N.W.T. Food Guide:

1. Foods with very few nutrients, e.g., ordinary and diet soft drinks and gum, which are usually fabricated, i.e., they do not come directly from nature and often contain unnecessary additives; these foods do little to build a strong body;

2. Foods such as potato chips, processed meats and chocolate bars which suffer nutritionally because processing removes many useful nutrients and leaves only those nutrients, e.g. sugar, fat and salt, which can be unhealthy when consumed in excess; they do little to build or maintain a strong body, and often contribute to tooth decay, obesity or high blood pressure.

The following foods in particular are often considered healthy when in fact they contain large amounts of sugar, fat or salt. They do not belong to any food group:

— whipping cream, cereal cream and sour cream, although they are dairy products, they do not belong to the Milk Group because they contain very little calcium or protein and are high in fat;
— non-dairy beverage whiteners, e.g., Coffeemate, even though they look like milk in coffee and tea, do not belong to the Milk Group because they contain no milk, but mostly sugar and oils;
— canned meats, e.g., Klik, Spam, bologna, side bacon and wieners do not belong to the Meat Group because they contain very little protein and Iron and are high in salt and fat;
— fruit drinks, fruit pop, Fruit Roll-ups, fruit jam, jelly and Jello do not belong to the Fruits and Vegetables Group because they are all high in sugar and contain very few vitamins;
— doughnuts, sweet buns, cookies and cakes have all the nutrients of the flour or cereal used in their baking, however they also contain extra fat and sugar. Sweetened cereals are sometimes enriched, and therefore contain nutrients, however they have a high sugar content.

These foods are sometimes referred to as "extras". The N.W.T. School Health Program has avoided use of this term and instead labelled them as foods which do not belong to any food group.

## SNACKS

In the N.W.T. School Health Program "snacks" refer to foods eaten between main meals. They may be either nutritious (belonging to one of the four food groups) or non-nutritious (not belonging to a food group), depending on the food eaten.

Snacking habits vary greatly among families and cultures. In some families food may be more or less continuously available for eating between meals. In others, eating between meals may be discouraged. The teacher should be sensitive to this and try to determine what snacking habits his/her students have.

It is important, however, that all snacks are nutritious and are included as part of the recommended daily servings.

## IMPACT OF SNACKING ON NUTRITIOUS MEALS

Nutritious meals are defined as those where there is at least one serving from each of the four food groups. The exception is breakfast which requires servings from only three food groups.

This concept of nutritious meals is based on the practice of very little snacking. If, in fact, students snack a lot (on nutritious foods) then they would not eat servings from each food group at each meal. Students should look at their daily food intake to determine if they are eating nutritiously recommended daily servings.

Milk and milk substitutes - 4 servings
Meat, fish, birds and eggs - 2 servings
Bannock, bread and cereal - 3 - 5 servings
Fruit and vegetables - 4 - 5 servings

Again, it is important to emphasize the need for nutritious food to start the day.

# SNACK GUIDE

| Food Group | Eat Anytime! | Eat Only With Meals and Brush Teeth Afterwards | Don't Snack on Regularly | Avoid These Snacks! |
|---|---|---|---|---|
| Milk and milk substitutes (Blue Group) | Plain milk, plain yogurt, cheese, soft ends of bones, soft fish bones | Milk puddings,ice cream, milkshakes, sweetened yogurt, strawberry milk, chocolate milk | | |
| Meat, fish, birds and eggs (Red Group) | Country meats, store meats, dried meat, fish, wild birds, fish eggs, nuts and seeds, hardcooked eggs, peanut butter | | | |
| Fruits and vegetables (Green Group) | Raw berries, fruits, vegetables, salads, vegetable soup, seaweed, unsweetened fruit and vegetable juice, animal stomach contents | Raisins, dried fruit, sweetened fruit, sweetened fruit juice, unsweetened fruit leather | | |
| Bannock, bread and cereal (Orange Group) | Bannock, enriched and whole grain breads and muffins, crackers, unsweetened cereals, plain popcorn | Granola bars, homemade; low sugar, granola, whole grain cookies | | Presweetened cereal |
| Other foods (foods in more than one group and foods not in the Food Guide) | Pizza, clear soups, sandwiches (meat, cheese, eggs or peanut butter) hamburgers | | Pretzels, buttered/ salted popcorn, potato chips, cheesies, sugar-free soft drinks, sugar-free gum | Regular soft drinks (pop), honey, jam, jellies, chocolate bars, cookies, candies, regular gum, breath mints, popsicles, sweet buns, doughnuts. "Drink' crystals (Tang), fruit roll-ups |

**N72**

## A VARIETY OF HEALTHY SNACK FOODS

### FRUITS AND VEGETABLES

Unsweetened fruit or vegetable juice (the word "juice" must be on the label); raw fruit and vegetable pieces; canned fruits that are unsweetened or packed in their own juices; fruit juice popsicles; wild berries; wild vegetables.

### MILK AND MILK PRODUCTS

Homo milk, evaporated, UHT; 2% of skim milk, or reconstituted skim milk powder or a combination; low fat cheese; cheese or cottage cheese; plain yogurt; plain yogurt with fresh fruit or juice added; soft ends of bones to chew on.

### BREAD AND CEREALS

Bannock; crackers, pilot biscuits, etc.; unsweetened dried cereals; cooked cereals; whole wheat bread or toast; enriched white bread or toast; fruit or whole grain muffins or loaf; homemade cookies — oatmeal, peanut butter.

### MEAT AND ALTERNATIVES

Wild game — raw, fresh, frozen, cooked or smoked; fish — canned, fried, frozen or smoked; hard cooked egg; peanut butter; nuts and seeds — sunflower and pumpkin; cheese; meat — sliced, cold, cooked, canned, dried, smoked.

JUICE
NO SUGAR ADDED

### COMBINATION SNACKS

Bannock with peanut butter, cheese, berries, raisins, etc.; celery sticks with peanut butter or cheese; mini pizza (English muffin or roll with tomato or spaghetti sauce and cheese); peanut butter on toast or bread; cheese on toast or bread; cheese and crackers; cheese and fruit; raw fruits or vegetables with a yogurt dip; cereal with milk and fruit.

Snacks can be served with unsweetened fruit juice or milk as a beverage. To quench thirst, water is the best!

Material for Teacher Background Information is adapted from: N.W.T. Food Guide (Teaching Guide): Regional Nutritionist, Medical Services Branch, N.W.T. Region; Nutrition Month Kits (1985 - 1988): Nutrition Liaison Committee of the N.W.T., Medical Services Branch, N.W.T. Region.

# GRADE ONE

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# DENTAL HEALTH

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## DENTAL HEALTH

**GRADE 1** **LESSON: 1** **THEME: STRUCTURE AND FUNCTION**

**CONCEPT:** PEOPLE DEVELOP TWO SETS OF TEETH IN THEIR LIFETIME

**PREPARATION:**

1. Pocket chart and sentence strips
2. A list of words to describe baby and permanent teeth
3. Prepare a class set of the 'My Teeth' worksheet (Activity Sheet D6)
4. Several hand mirrors
5. Prepare a class set of 'My Wobbly Tooth' (Activity Sheet D7)

**VOCABULARY:** permanent, spaces, wobbly

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) identify primary and permanent teeth | Students:<br>1. Look at a classmate's teeth. | Background Information: Page D35 to D42<br>Divide students into pairs. Have students look at their partner's teeth.<br>Have them:<br>· count how many teeth are on the bottom<br>· count how many teeth are on the top<br>· look for any spaces where teeth are missing<br>· look for any new teeth |

**OBJECTIVES** | **STUDENT ACTIVITIES** | **TEACHER NOTES**

2. Compare a permanent tooth with a baby tooth.

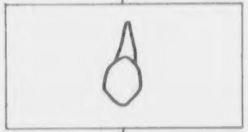
Have students respond to the questions using the sentence patterns:

I have | 10 | teeth | on the bottom
John has | 9 | teeth | on the top
I have | no | spaces
John has | 1 | new tooth

Explain that when a baby tooth falls out, it is replaced by a permanent tooth. (At this age, a child's permanent teeth are likely to be the lower centre front teeth and the four six-year molars at the back of the upper and lower jaw.)

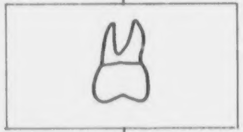
Have students compare a baby tooth and a permanent tooth. Make a list of the differences.

A baby tooth



white
sharp
pointed
small
thin

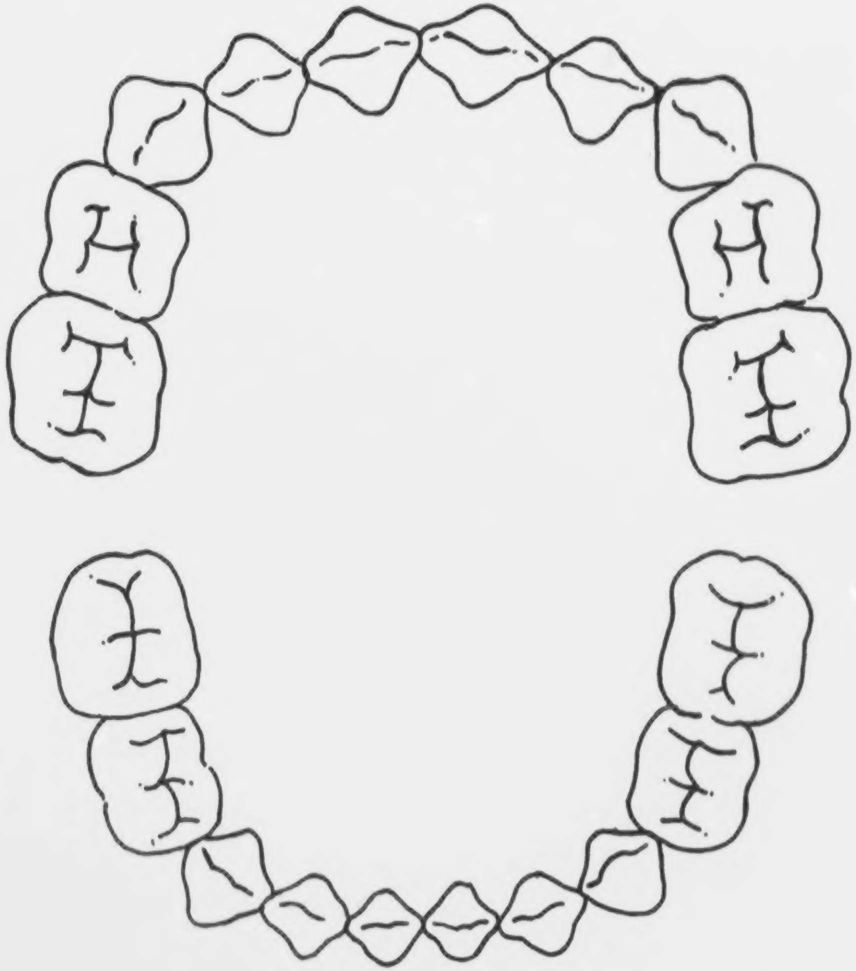
A big tooth
A permanent tooth



creamy-white
wide
big

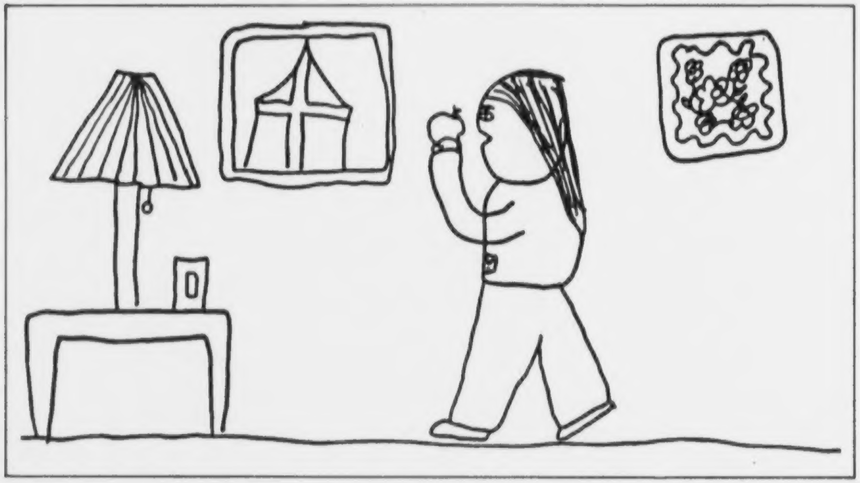
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Describe the status of their own teeth. | Refer to Activity Sheet D6.<br>Using a mirror, have students look at their teeth. Have students colour their baby teeth, any teeth they have lost and their permanent teeth on the diagram. They should use a different colour for each category. (Teachers, classroom assistants or parents may have to help with this activity.)<br>Students should keep this activity sheet to update when they lose or acquire teeth. |
|  | 4. Learn and say the poem 'My Wobbly Tooth'. | Refer to Activity Sheet D7. |

# MY TEETH



# MY WOBBLY TOOTH

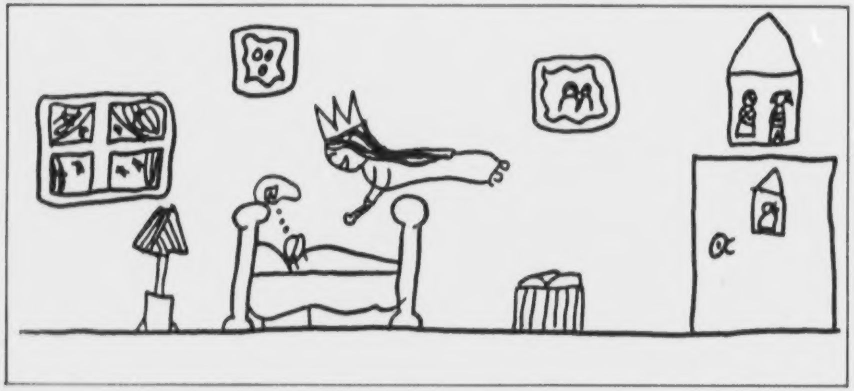
D7

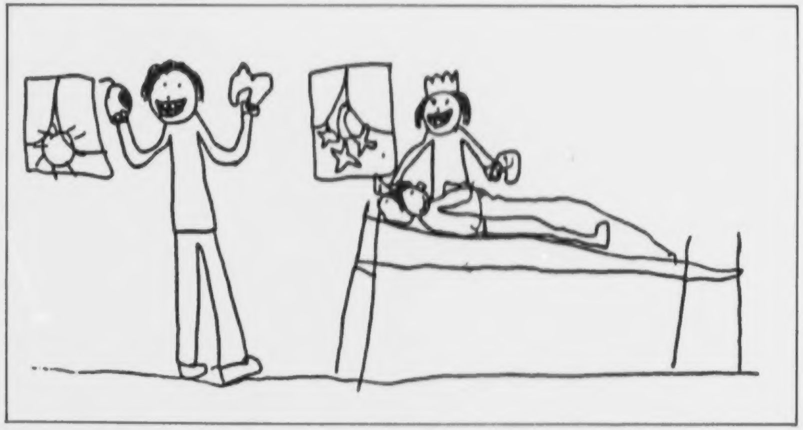


I bit my apple
And what do you think?
My wobbly tooth
Came out in a wink.

If I put it under my pillow tonight
Will the tooth fairy come
When I turn out the light?

(Grade 2-3 class, Maani Ulujuk School, Rankin Inlet (1985) )





## DENTAL HEALTH

**GRADE 1** **LESSON: 2** **THEME: STRUCTURE AND FUNCTION**

**CONCEPT:** TEETH HAVE MANY FUNCTIONS

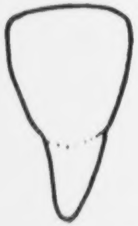
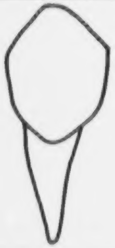
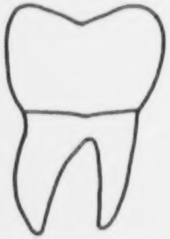
**PREPARATION:**

1. A crunchy snack food for the class e.g., apples, carrots, celery
2. Prepare a class set of the 'Three of My Teeth' cards (Activity Sheet D8)
3. Collect animal teeth of different shapes and sizes
4. Prepare a class set of the 'I Like To Bite' poem (Activity Sheet D9)
5. Materials for salt beads (salt, flour, wool, nails, waxpaper, food colouring)

**VOCABULARY:** cut, bite, tear, crush, chop

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page D53 to D60 |
| i) describe the functions of the teeth | 1. Eat a crunchy snack food. | Have students eat a crunchy snack **slowly**. Ask them to think about what their different teeth are doing when they eat food. |
| | 2. Describe the functions of the different teeth in preparing food for digestion. | Refer to Activity Sheet D8. |

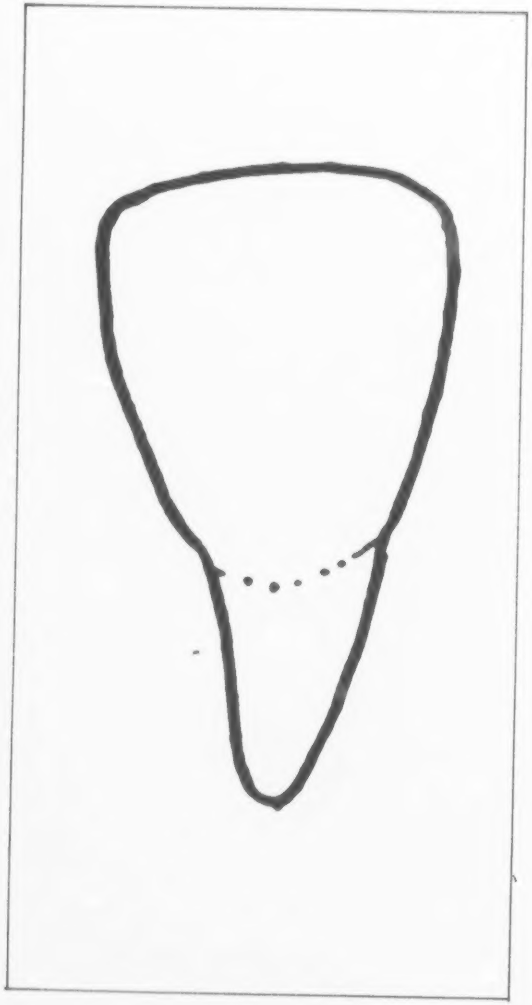
Record student responses using an experience chart as illustrated:

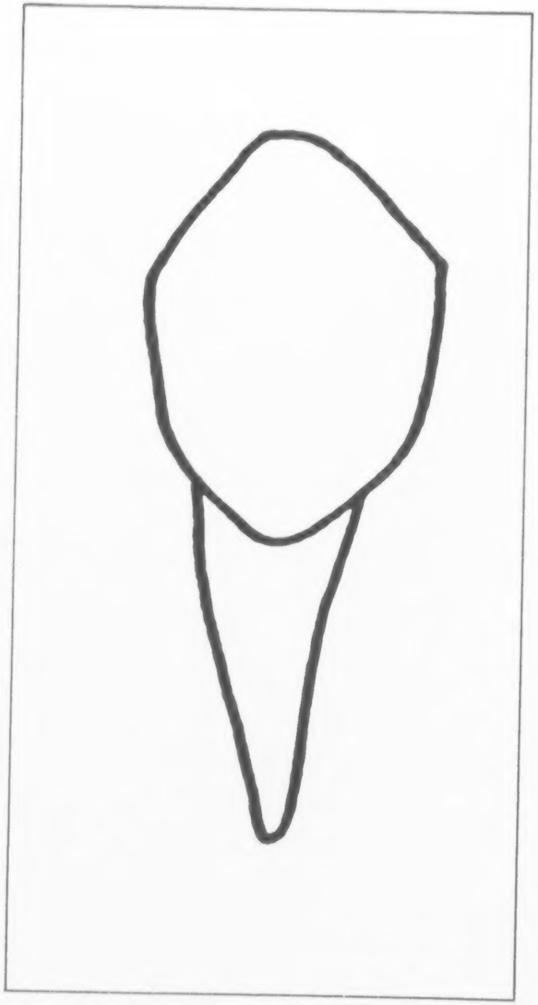
| **tooth?** | **where?** | **what?** |
|---|---|---|
|  | 2 front teeth | cut<br>bite<br>tear |
|  | side | tear |
|  | back | crush<br>chop up<br>chew |

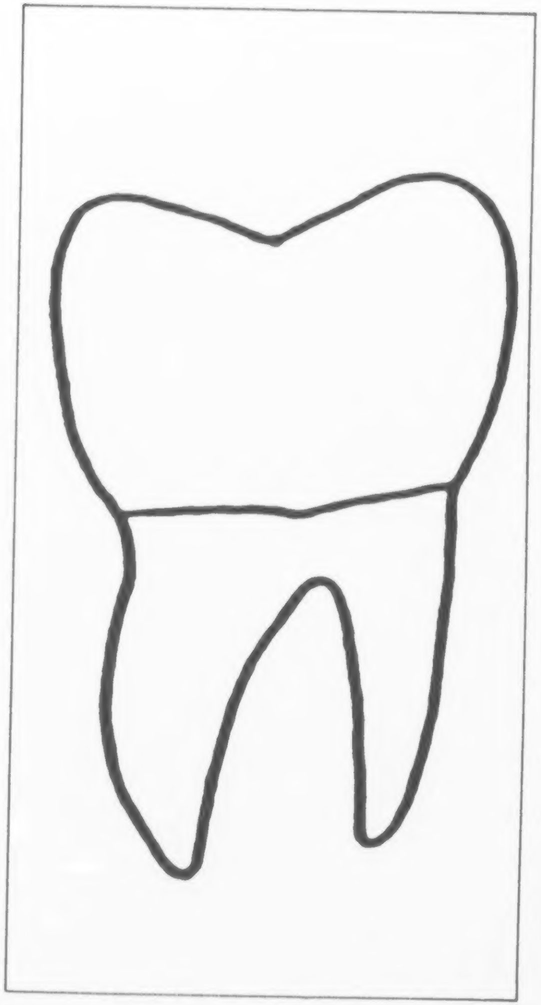
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Identify what each kind of tooth does. | Refer to Activity Sheet D8.<br>Give each student 3 cards - each with a different kind of tooth. The teacher names the function and students have to hold up the card with the tooth which performs that function. |
|  | 4. Look at animal teeth and infer the functions of the different teeth. | Try to collect different shapes and sizes of animal teeth.<br>Have students look at them and determine what function they perform. |
|  | 5. Make a model tooth that illustrates a specific tooth. | Use salt bead recipe to make a model tooth that can be used as a necklace.<br>**Materials Required:**<br>- 2 parts table salt<br>- 1 part flour<br>- cord or coloured wool 36-40 cm in length; nails, wax paper, food colouring or poster paint.<br>**Method:**<br>- Have students decide the shape and specific function of the tooth they wish to make.<br>- Mix salt, flour and water to a dough consistency. Colouring may be added.<br>- Break off small pieces of modeling dough and form a specific tooth shape. Model tooth can be 5-10 cm.<br>- Pierce a hole near the top of the model tooth with a nail.<br>- Place model tooth on wax paper to dry overnight.<br>- Turn the model tooth over the next day to allow the other side to dry.<br>- Thread the cord or wool through the hole and knot. Paint if desired. |
|  | 6. Learn and say the poem 'I Like To Bite'. | Refer to Activity Sheet D9. |

# THREE OF MY TEETH

D8





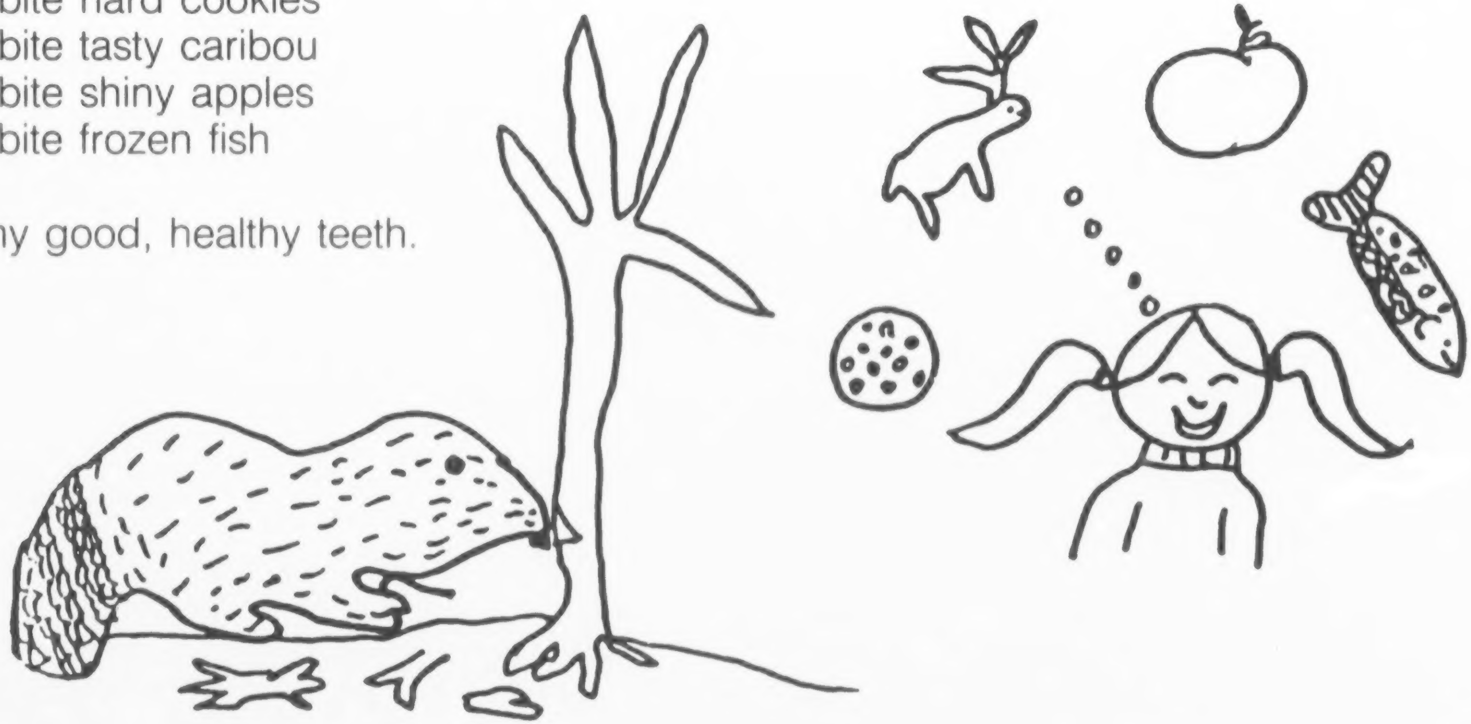


# I LIKE TO BITE...

I want to have strong teeth like a beaver.

I like to bite hard cookies
I like to bite tasty caribou
I like to bite shiny apples
I like to bite frozen fish

with my good, healthy teeth.



Grade 2-3 class, Maani Ulujuk School, Rankin Inlet (1985)

**DENTAL HEALTH**

**GRADE 1** **LESSON: 3** **THEME: ORAL HYGIENE**

**CONCEPT:** REGULAR USE OF ORAL HYGIENE SKILLS PROMOTES DENTAL HEALTH

**PREPARATION:**

1. Prior to the lesson, invite a dental therapist, if your community has one, to demonstrate effective toothbrushing
2. A large dentiform model and toothbrush
3. Pocket chart and sentence strips
4. Prepare a class set of the 'This is the Way We Brush Our Teeth' song (Activity Sheet D10)
5. Enough toothbrushes and toothpaste for each student
6. Prepare a class set of large toothbrush pages for one week (5 copies for each student) (Activity Sheet D11)

**VOCABULARY:** important, care for

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page D53 to D60 |
| i) demonstrate effective toothbrushing skills | 1. Observe a demonstration on effective toothbrushing. | Prior to the lesson, invite a dental therapist, if there is one in your community, to visit the class to demonstrate effective toothbrushing. (If there is no dental therapist available, demonstrate yourself. A large dentiform model and toothbrush are helpful.) |
| | 2. Illustrate effective toothbrushing skills. | Have students take turns demonstrating effective toothbrushing skills. |
| | 3. Explain when they should brush their teeth. | Teeth **must** be brushed **thoroughly** once a day. They should also be brushed, whenever possible, after eating and before going to bed. If a person cannot brush after eating, s/he should rinse his/her mouth out with water. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Ask students when they should brush their teeth. Have them respond using the sentence pattern:<br>I must brush my teeth — in the morning<br>before I go to bed<br>after I eat<br>three times a day<br>Review the responses given by students by making deliberate errors. Students correct errors.<br>e.g., Teacher: I must brush my teeth in the mirror.<br>Students: I must brush my teeth in the morning. |
| | 4. Sing the song 'This is the Way We Brush Our Teeth'. | Refer to Activity Sheet D10.<br>Students learned the first four verses in Kindergarten. |
| ii) practise effective toothbrushing skills | 5. Practise daily toothbrushing skills at school. | Teachers are encouraged to have a brushing program at school throughout the year. Teachers can use weekly/monthly dental charts to record students' brushing behaviours.<br>Brushing programs at school support the home in promoting positive dental health behaviours. Children's toothbrushes can be stored individually in racks made by the children or by older children in the industrial arts shop. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| iii) explain the importance of caring properly for the teeth | 6. Explain why it is important to have healthy teeth. | Make a series of statements beginning with<br>Healthy teeth help us to ____________________.<br>Provide both true and false endings e.g.,<br>- write<br>- bite an apple<br>- watch T.V.<br>- talk<br>- chew meat<br>- drive a ski-doo<br>- sleep<br>- smile<br>Students stand up if the statement is true and sit down if the statement is not true. The endings can be recorded on an experience chart. |
| | 7. Explain why caring properly for teeth is important. | Brainstorm with students what might happen if they didn't care properly for their teeth. Consequences might include:<br>- toothache<br>- cavities<br>- teeth having to be removed<br>Since we have only two sets of teeth in a lifetime, it is important to have the teeth last for a lifetime. |
| | 8. Keep a record of their toothbrushing behaviours. | Refer to Activity Sheet D11<br>Have students make a book of their toothbrushing behaviours. This should be kept for a minimum of one week. Students should have one page for each day of the week. They should put a checkmark for each time they brush their teeth or rinse their mouth with water. |

# THIS IS THE WAY WE BRUSH OUR TEETH

This is the way we brush our teeth
Every single day.

We gently brush them up and down
Every single day.

We gently brush them round and round
Every single day.

We count to ten and brush each tooth
Every single day.

We brush them morning, lunch and night
Every single day.

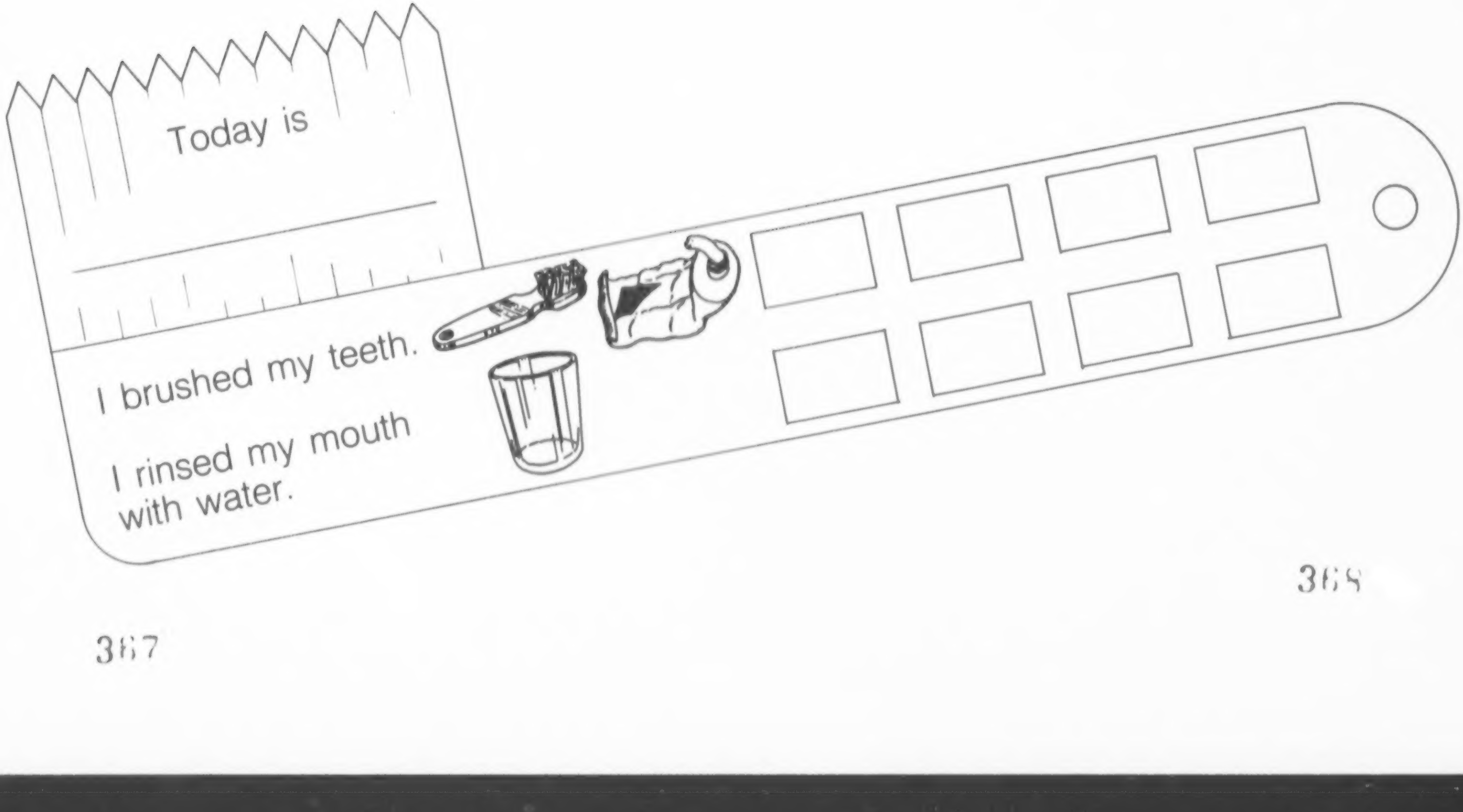
We brush them when we eat some food
Every single day.

(Tune: Here We Go Round The Mulberry Bush)

Helen Balanoff

# CARING FOR MY TEETH

D11


Today is
I brushed my teeth.
I rinsed my mouth with water.

**DENTAL HEALTH**

**GRADE 1** **LESSON: 4** **THEME: FACTORS AFFECTING DENTAL HEALTH**

**CONCEPT:** THE FOOD WHICH PEOPLE EAT AFFECT THEIR DENTAL HEALTH

**PREPARATION:**
1. Samples of sticky and non-sticky food and several knives
2. Materials (pictures, labels, wrappers) for the big books (Student Activity 4)

**VOCABULARY:**

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) give examples of dentally safe and dentally unsafe food | Students:<br>1. Describe what happens when they cut up various foods | Background Information: Page D53 to D60<br>Divide students into groups. Give each group a variety of different foods to cut up. Food samples might include:<br>- peanut butter<br>- apple<br>- celery<br>- marshmallow<br>- honey<br>- chocolate bar<br>- carrot<br>- cracker (pilot biscuit)<br>- sticky cookie<br>Students should examine the knife after they cut each food to see what happens to the knife. |

OBJECTIVES

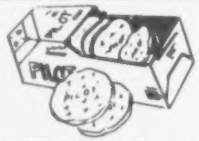
STUDENT ACTIVITIES

2. Explain what is meant by dentally safe and dentally unsafe foods.

TEACHER NOTES

Students have to classify each food as sticky or not sticky. Record student responses on an experience chart as illustrated:

| **Sticky** | |
|---|---|
| peanut butter | |
| marshmallow | |
| candy | |

| **Not sticky** | |
|---|---|
| apple | |
| carrot | |
| pilot biscuit |  |

Discuss.

Food that sticks to the knife also sticks to people's teeth.

| **Safe foods for teeth are:** | **Unsafe foods for teeth are:** |
|---|---|
| - low in sugar | - high in sugar |
| - not sticky | - sticky |

Teeth must be brushed after eating sticky food.

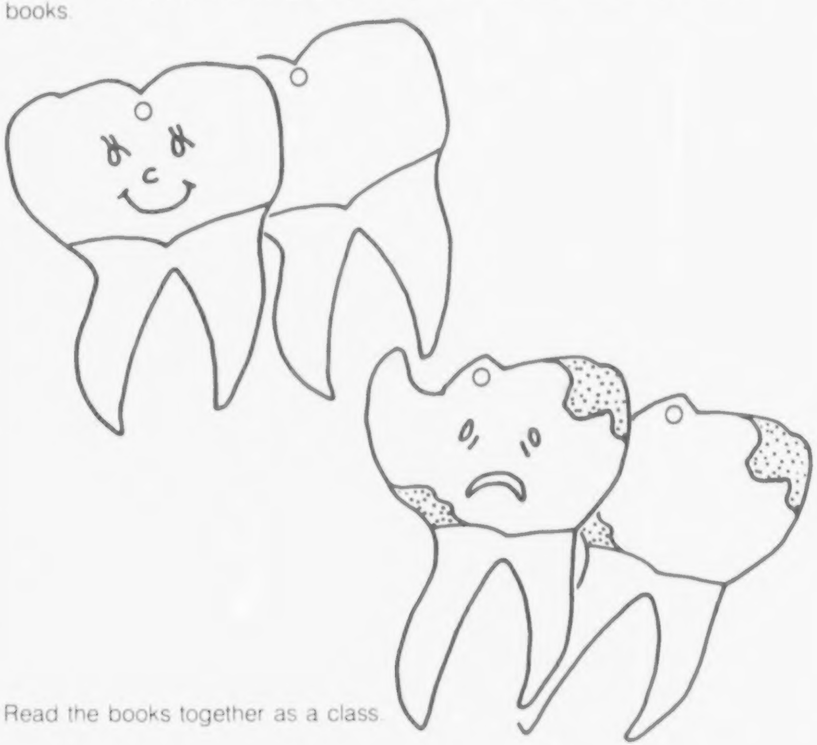
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 3. Give examples of dentally safe and dentally unsafe foods. | Have students brainstorm dentally safe and dentally unsafe foods. Record student responses as illustrated: |

**Dentally safe foods include:**

- unsweetened juice
- raw vegetables
- fruit
- nuts, seeds
- cheese
- milk
- plain yogurt
- whole wheat bread
- crackers
- plain popcorn
- meat
- fish

**Dentally unsafe foods include:**

- sweet drinks (pop, fruit drinks)
- jam, jello
- dried fruit
- puddings
- cake
- candy
- chocolate bar
- cookies
- gum
- ice cream

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Make two class big books of 'My Teeth Like...' and 'My Teeth Don't Like...'. | Divide the class into two groups.<br>Have one group make a big book called 'Happy Teeth' (of dentally safe foods) and the other make a big book called 'Sad Teeth' (of dentally unsafe foods). Students can cut out pictures, use food wrappers or labels for their books.<br><br>Read the books together as a class. |

**DENTAL HEALTH**

**GRADE 1** **LESSON: 5** **THEME: FACTORS AFFECTING DENTAL HEALTH**

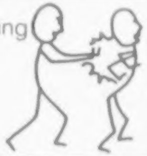
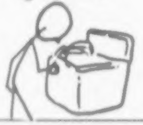
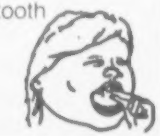
**CONCEPT:** POSITIVE BEHAVIOURS NEAR HAZARDS CAN PREVENT DENTAL INJURIES

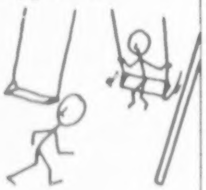
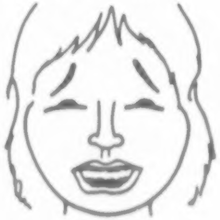
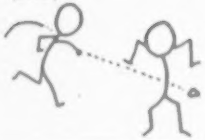
**PREPARATION:**

1. A copy of 'Peter's Tooth' story (Activity Sheets D12A, 12B, 12C, 12D)
2. Prepare a number of Dental Warning Signs (Activity Sheet D13)

**VOCABULARY:** behaviour, safe, unsafe

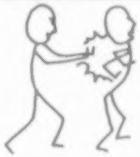
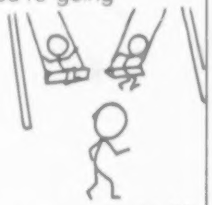
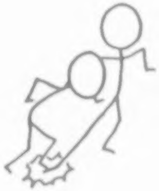
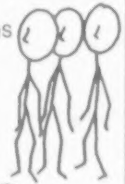
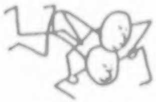
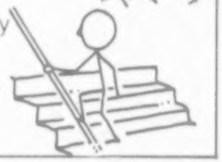
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page D53 to D60 |
| i) identify dentally safe and dentally unsafe behaviours near hazards | 1 Listen to the story 'Peter's Tooth'. | Refer to Activity Sheets D12A, 12B, 12C and 12D.<br>Discuss how Peter's tooth got broken. |
| | 2 Brainstorm other ways dental injuries may occur. | Have students think of other ways they can hurt their teeth. Record student responses in the first column of an experience chart as illustrated: |

| How? | Where? | What? |
|---|---|---|
| - pushing  | - drinking fountain  | - loose tooth  |

| | | |
|---|---|---|
| - tripping | - icy steps | - broken tooth |
| - rough play | - playground  | - cut lip or gum  |
| - not looking where you are going | - with something in in your hand | |
| - throwing things at people  | - in the yard | |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 3. Identify some hazards where dental injuries may occur. | Have students think about places where dentally unsafe behaviours are a particular problem. Record student responses on the next column of the experience chart. |
| | 4. Describe some of the dental injuries which may occur. | Brainstorm some dental injuries. Record responses on the last column of the experience chart. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 5. List ways to prevent dental injuries around the hazards. | This can be added as another two columns to the experience chart. |

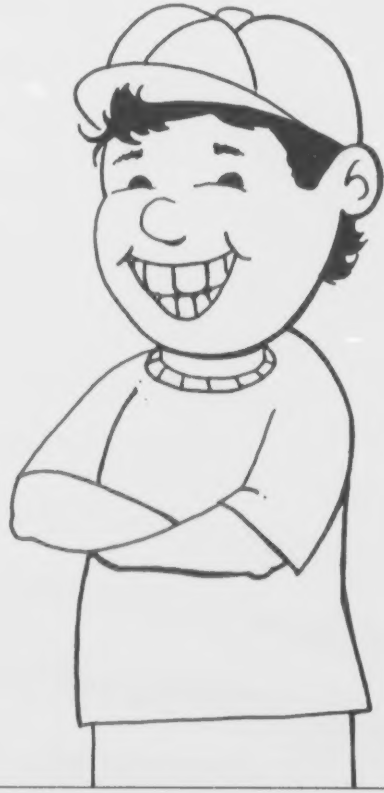
| Don't ✗ | Do ✓ |
|---|---|
| - push  | - look where you're going  |
| - trip  | - line up and take turns  |
| - play rough  | - walk carefully  |

| | | |
|---|---|---|
| | 6. Participate in a dental hazard hunt. | Refer to Activity Sheet D13.<br>Have students cut out the Dental Warning Signs. Take students on a tour of the school. Identify particular dental hazards e.g., drinking fountains, playground equipment, gym equipment, stairs. Have students stick a dental warning sign on each.<br>Discuss positive behaviours related to these hazards which will help prevent dental injuries. |

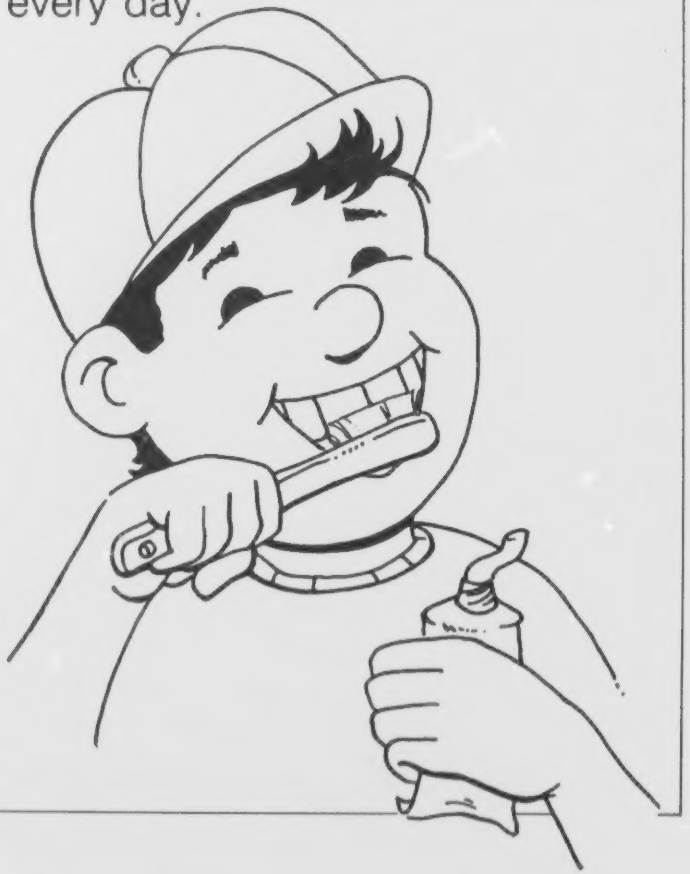
# PETER'S TOOTH

D12A

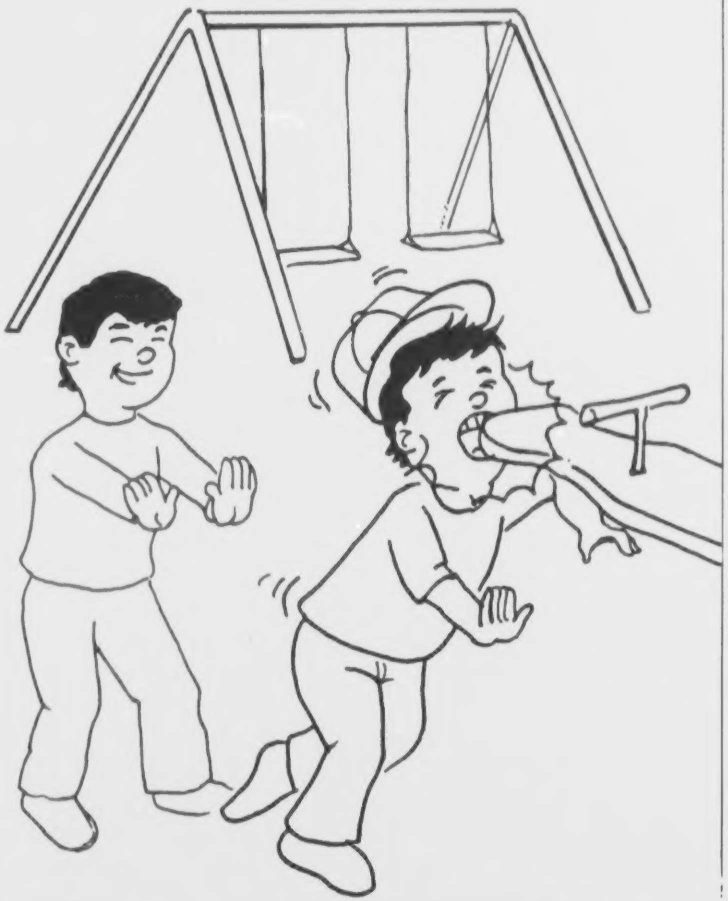
Peter was a little boy with nice white teeth.



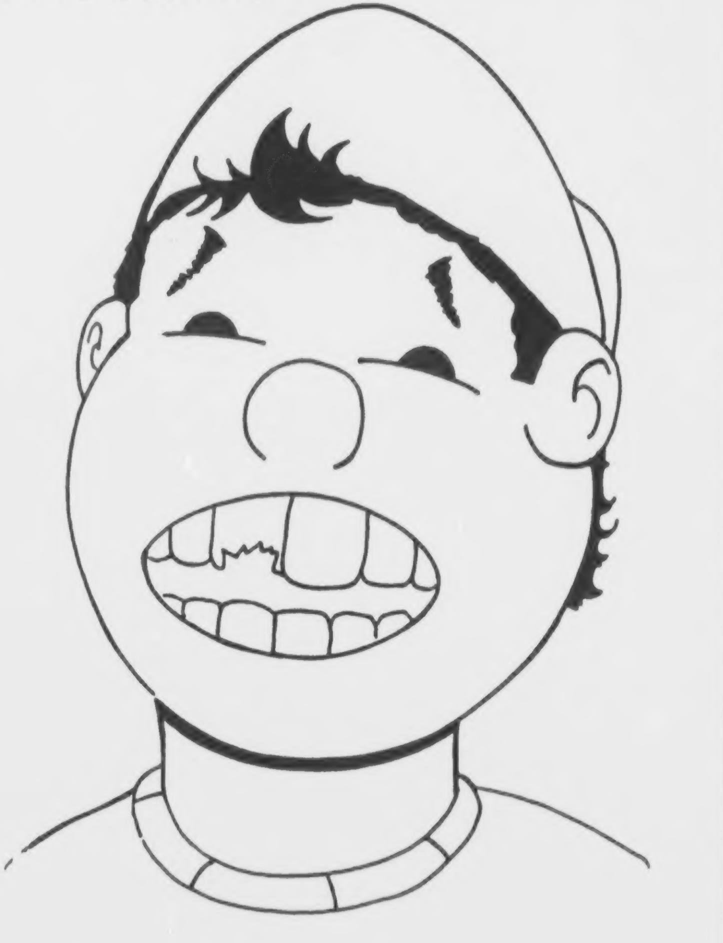
Peter looked after his teeth. He brushed them every day.



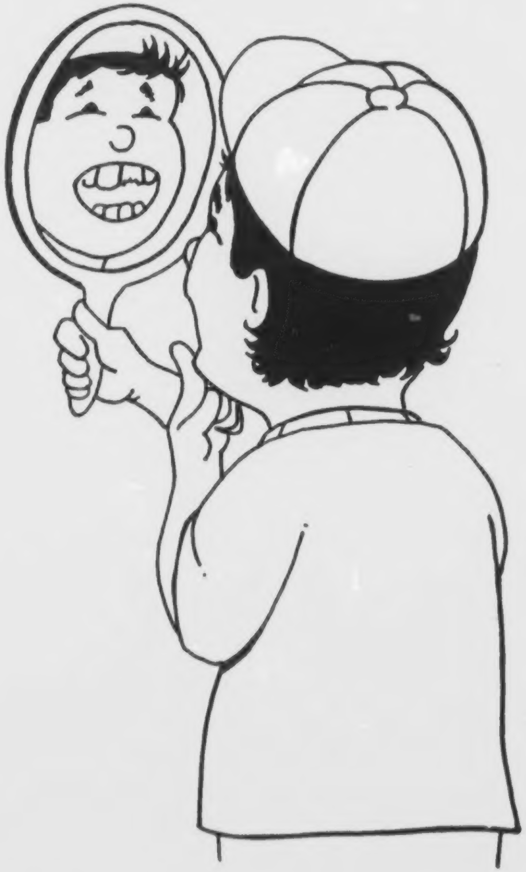
One day, Peter was playing with his friends when he got a bump.



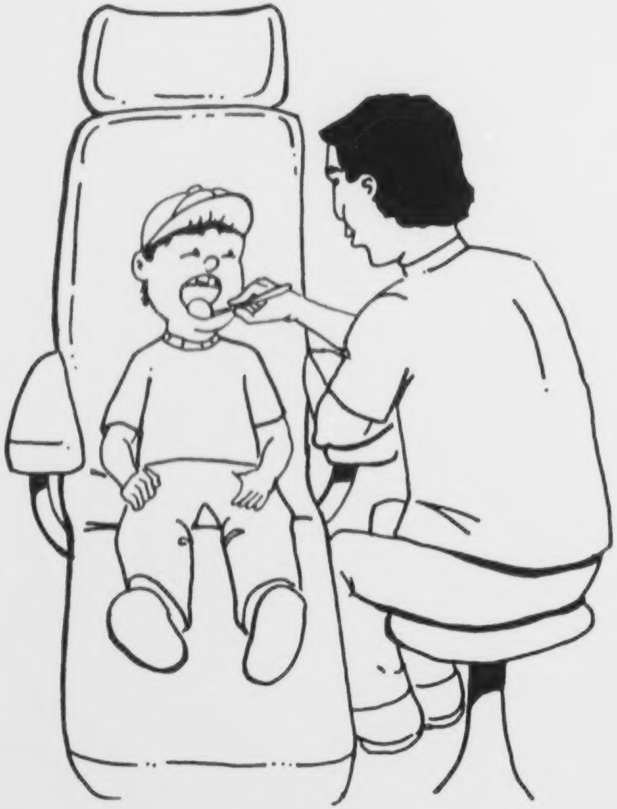
'Ouch' said one of Peter's teeth. 'Help me. I've been hurt!'



Peter looked in the mirror and saw his broken tooth.

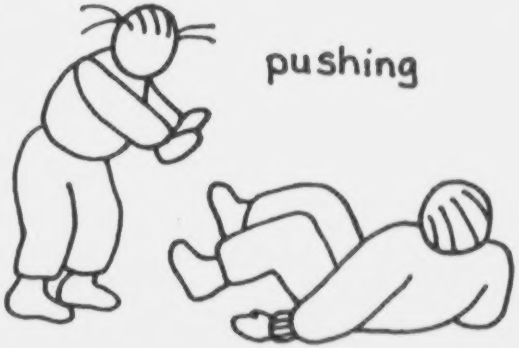


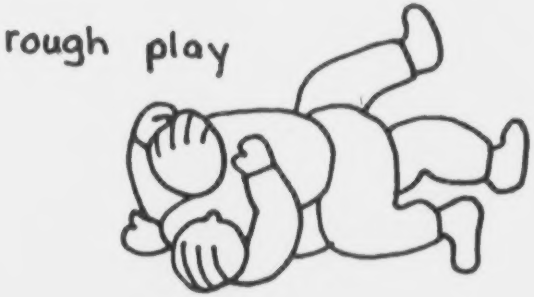
His mother took him to the dentist.

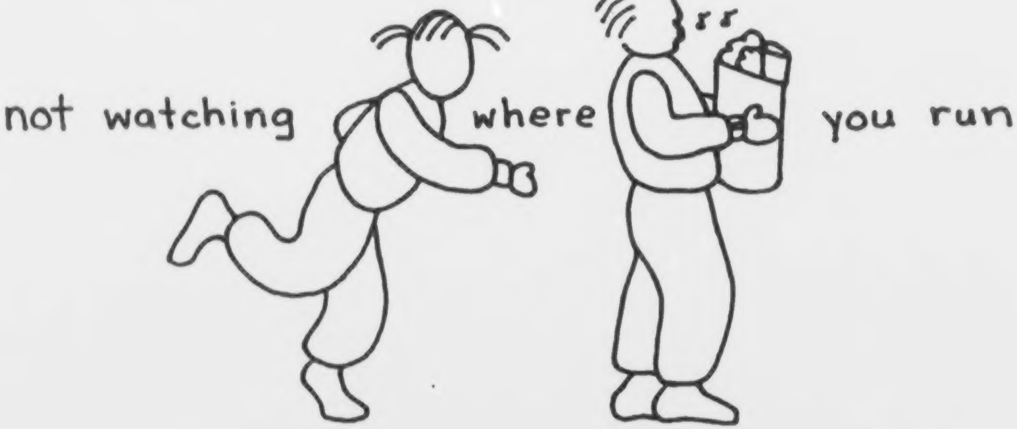


**D12D**

The dentist said to Peter, "Boys and girls have to play safely. Rough play, like pushing, tripping, not looking where you are going may cause an accident to your teeth."

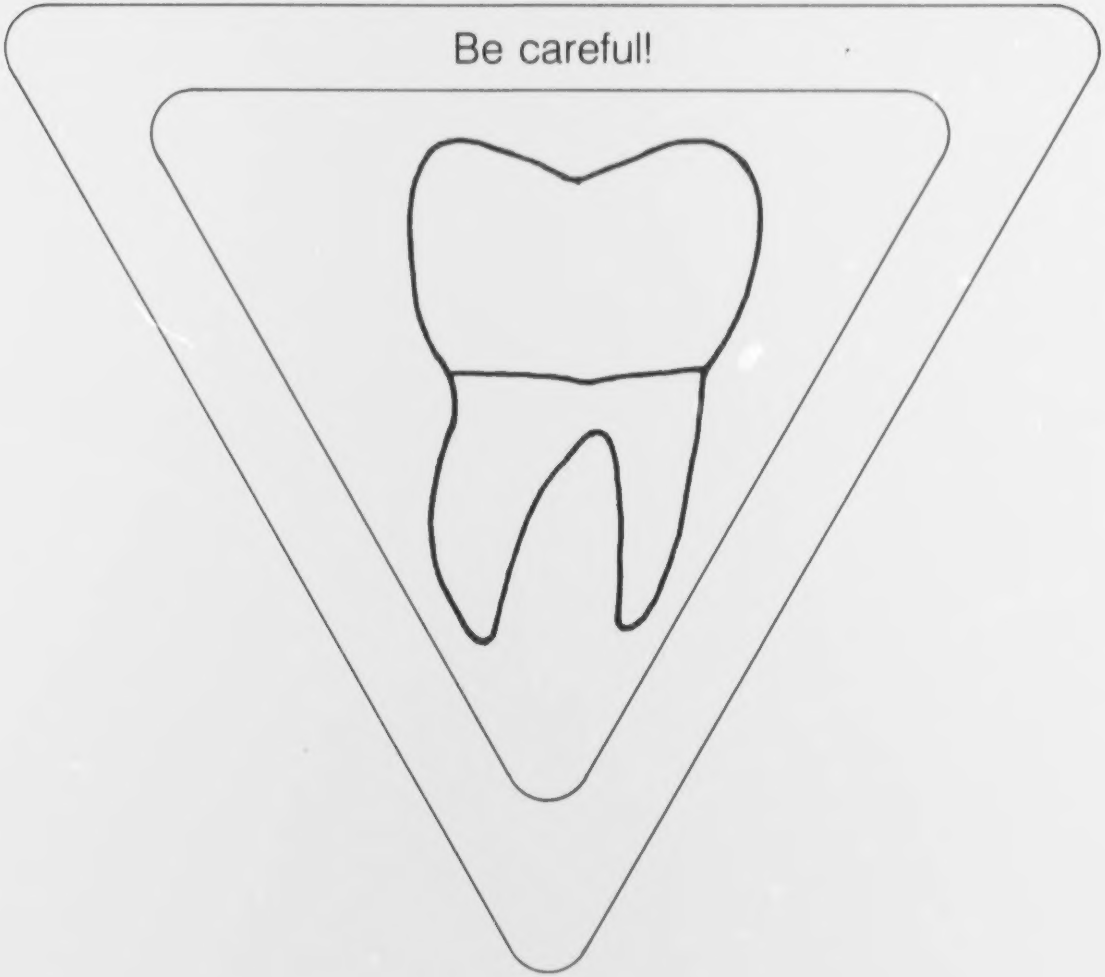





not watching where you run

# DENTAL WARNING SIGN

D13



# DENTAL HEALTH

**GRADE 1** **LESSON: 6** **THEME: DENTAL DISEASE**

**CONCEPT:** MANY FACTORS CONTRIBUTE TO DENTAL DISEASE

**PREPARATION:**

1. One apple and a nail for each group of students
2. Prior to the lesson, have students do the first part of the experiment
3. Props to represent factors that contribute to tooth decay
4. Prepare a class set of the 'Healthy Teeth' song (Activity Sheet D14)
5. Prepare a class set of the 'Keeping My Teeth Healthy' worksheet (Activity Sheet D15)

**VOCABULARY:** brown, rotten, hole, bad, ugly

## OBJECTIVES

Students will be able to:

i) explain that a tooth can decay

## STUDENT ACTIVITIES

Students:

1. Conduct an experiment that shows how tooth decay occurs.

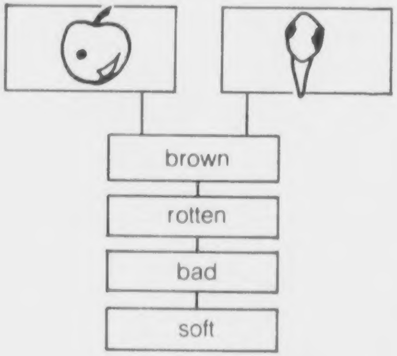
## TEACHER NOTES

Background Information: Page D53 to D60

Divide students into groups.

A few days before the lesson give each group a clean, firm apple. Have them make observations about the apple. Have them poke a hole in the apple with a nail. Have students make daily observations about the apple.

| **day** | **apple** |
|---|---|
| Monday | - clean<br>- red<br> |
| Tuesday | - little brown hole<br> |
| Wednesday | - bigger brown hole<br> |

| | | |
|---|---|---|
| | | During the lesson, have students cut the apple open and observe how the decay has spread.<br>Explain that when a tooth gets a hole, it will decay in the same way as the apple. Tooth decay takes longer. |
| | 2 List words to describe the decay | Using the apple as an example, make a list of words that describe decay.<br><br> |
| ii) identify factors that contribute to tooth decay | 3. Name factors that contribute to tooth decay. | Use props to help students identify factors that contribute to tooth decay.<br>Props should include:<br>- candy/sticky food (eating too much, too often)<br>- toothbrush/toothpaste (not brushing properly/regularly)<br>- picture of dental worker (not having regular check-ups)<br>- picture of dental hazard (not practising safe behaviours) |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| iii) identify preventive behaviours related to tooth decay | 4. Roleplay positive behaviours which help prevent tooth decay. | Have students roleplay positive behaviours which help prevent tooth decay. Positive behaviours include:<br>- refusing candy, choosing fruit/vegetable instead<br>- brushing properly three times a day<br>- visiting the dentist for regular check-ups<br>- practising dentally safe behaviours<br>Have other students guess which positive behaviour the student is practising. |
| | 5. Learn and sing 'The Healthy Teeth' song. | Refer to Activity Sheet D14. |
| | 6. Complete the 'Keeping My Teeth Healthy' worksheet. | Refer to Activity Sheet D15.<br>Have students circle the happy tooth if the activity helps to keep their teeth healthy, the sad tooth if it contributes to tooth decay. |

# HEALTHY TEETH

**D14**

Keeping my teeth white and strong, white and strong, white and strong
What can I do?

Choosing apples not candy ... ...
That's what I'll do.

Cleaning teeth three times a day ... ...
That's what I'll do.

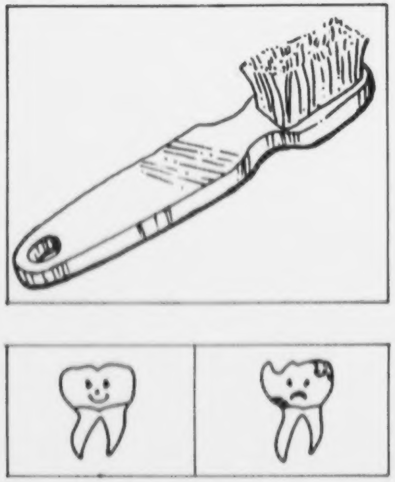
Playing safely in the yard ... ...
That's what I'll do.

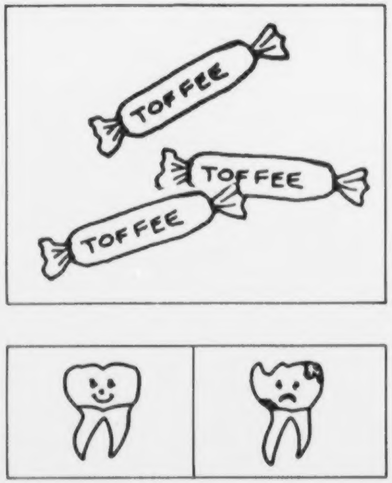
Seeing the dentist twice a year ... ...
That's what I'll do

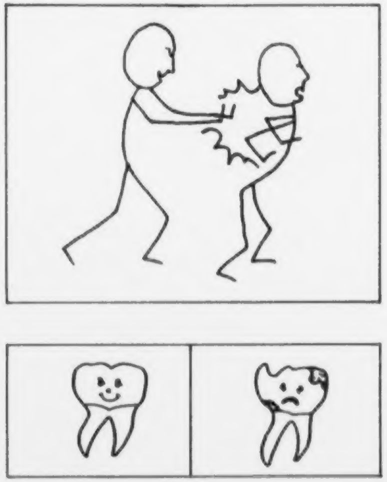
Keeping my teeth white and strong
All my life!

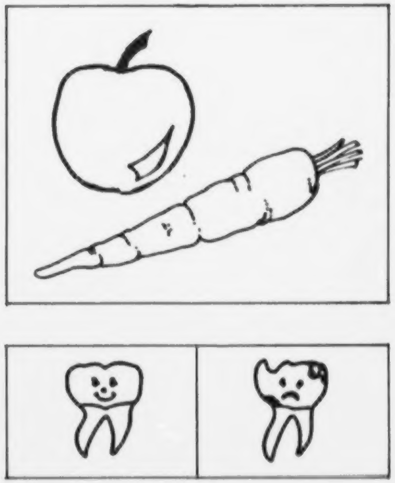
(Tune: London Bridge is Falling Down)

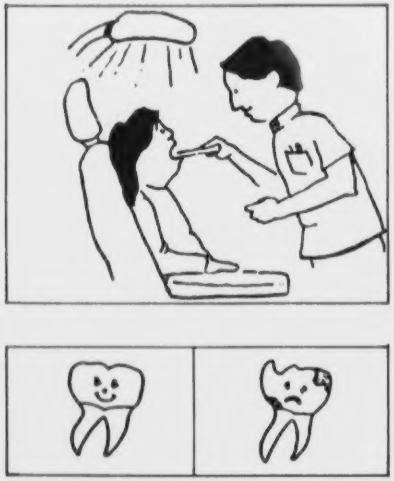
# KEEPING MY TEETH HEALTHY

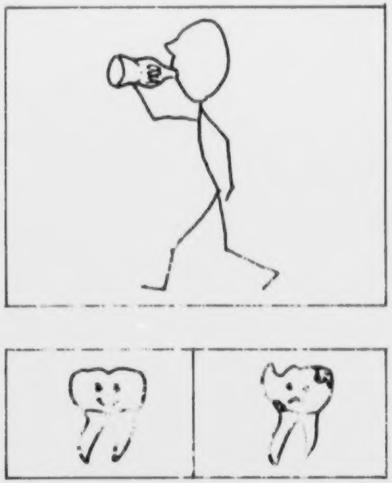


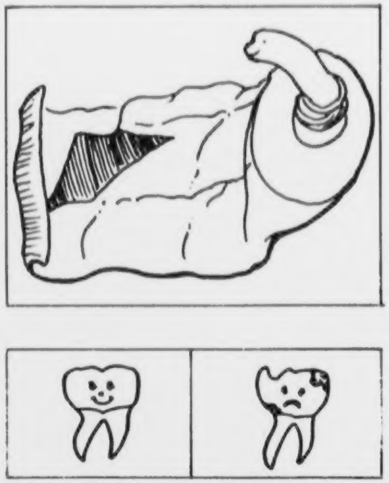

TOFFEE
TOFFEE
TOFFEE

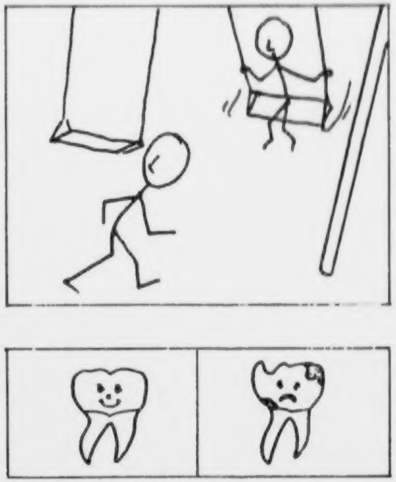












## DENTAL HEALTH

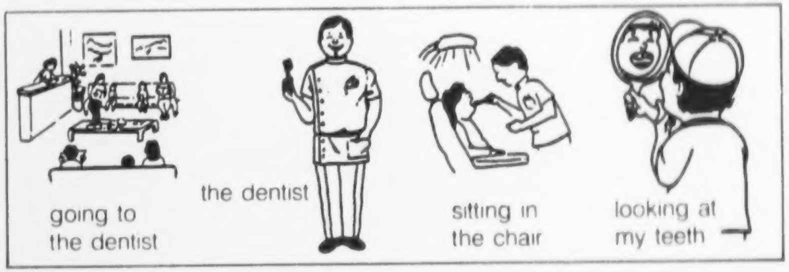
**GRADE 1** **LESSON: 7** **THEME: DENTAL SERVICES AND PRODUCTS**

**CONCEPT:** DENTAL HEALTH WORKERS ARE IMPORTANT IN DENTAL HEALTH CARE

**PREPARATION:**
1. Prior to the lesson, arrange for students to visit the dental office to learn about dental services
2. A camera and film to photograph the visit
3. Materials for a frieze

**VOCABULARY:** dentist, dental therapist, dental health worker

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page D53 to D60<br>If the community has no permanent dental health workers, teachers should teach this lesson to coincide with a visit by the dental health worker. |
| i) identify local dental health workers | 1. Name local dental health workers. | Ask students who they would go to see about their teeth. Dental health workers include:<br>- dentists<br>- dental therapists<br>If the dental health worker travels from another community, identify which community s/he comes from. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 2. Visit the local dental office. | Prior to the lesson, arrange to take the students on a visit to the dental office. Ask the dentist or dental therapist to describe what they do. Ask them to let children sit in the chair and explain what s/he (the dental worker) is doing, as s/he describes the services.<br>Take photographs of the visit. |
| | 3. Make a class frieze of 'Going To The Dentist'. | Divide the students into pairs. Have each pair make a long frieze about the dental health worker(s).<br><br> going to the dentist<br>the dentist<br>sitting in the chair<br>looking at my teeth<br>Attach the photographs around the frieze. |

# GRADE 1

# TEACHER BACKGROUND INFORMATION

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## DENTAL HEALTH

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## DENTAL DECAY

The strange thing about dental decay is that it is so prevalent when so much is known about its causes and prevention.

There is no doubt that dental decay is a bacterial disease and is specifically related to the activity of dental or bacterial plaque which forms on teeth. If the teeth are thoroughly cleaned, this bacterial film or plaque will reform within 24-36 hours. The plaque progressively thickens if left undisturbed for several days, and in some areas of the mouth may become covered by food debris. Much of this food debris can be removed by rigorous mouth rinsing with water, but the plaque itself is only removed by brushing and flossing. The particularly damaging property of dental plaque is the ability of the bacteria to thrive on dietary sugar and to rapidly produce acids which can dissolve the tooth material.

It is apparent that diet is an important factor in decay. The typical Canadian diet is high in refined carbohydrates, and is highly conducive to dental decay. Sticky candies or confections which adhere to the teeth or hard candies which are kept in the mouth for long periods of time are particularly damaging since they provide sugar to the plaque, and hence destructive acids, for a prolonged period of time. It is the food remaining in the mouth that is important to plaque activity. Hence, regular and thorough removal of food and plaque could theoretically eliminate the decay-producing activity of the diet. In reality, it would be dangerous to rely completely on oral hygiene for the prevention of dental decay.

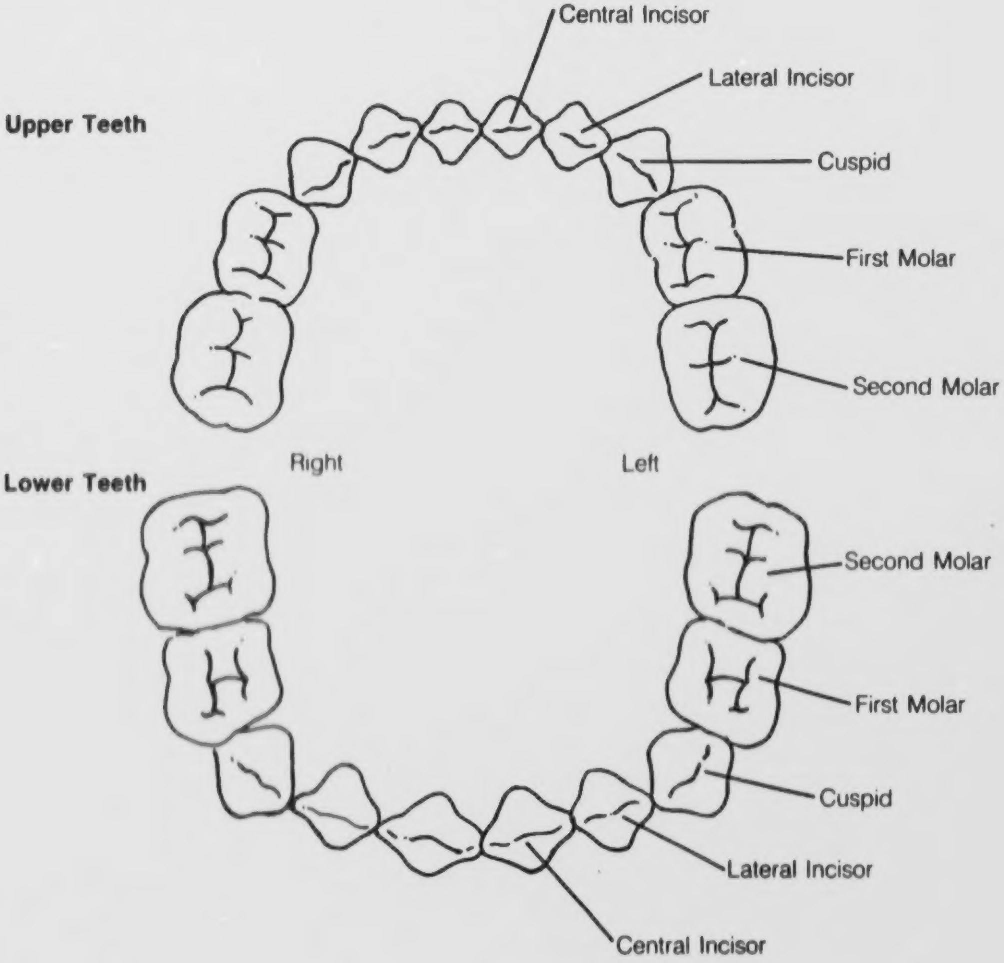
The role of heredity in dental disease is not well understood. Despite seemingly inherited bad gums or proneness to decay, personal neglect and poor quality dentistry are leading causes of poor teeth. Experience does indicate that some mouths are more prone to decay than others, but not because of so-called soft teeth. People who believe they have soft teeth often despair of their chances to keep their teeth. This despair is often associated with poor oral hygiene, dental neglect, faulty nutrition, or experience with poor-quality dentistry. With good home care, regular dental visits and the conscientious application of the principles of modern dentistry, most people should be able to enjoy a healthy mouth and retain their teeth for their lifetime.

Good oral hygiene (proper brushing after each meal and brushing and flossing prior to going to bed) is difficult enough for adults to establish; for children, it is doubly difficult. Not only do young children lack the dexterity to brush and floss their teeth properly, but the benefits of such skills would be considerably reduced in the typical young "continuous eater". Parents should not only assist their young children in the brushing technique and floss their children's teeth up to about age 8, but should strive to keep the snack habit to the minimum, particularly of foods and drinks containing sugar. In lunches or at snack time children should not be given hard or sticky treats such as lollipops or toffee having sugar that remains in the saliva for a long time.

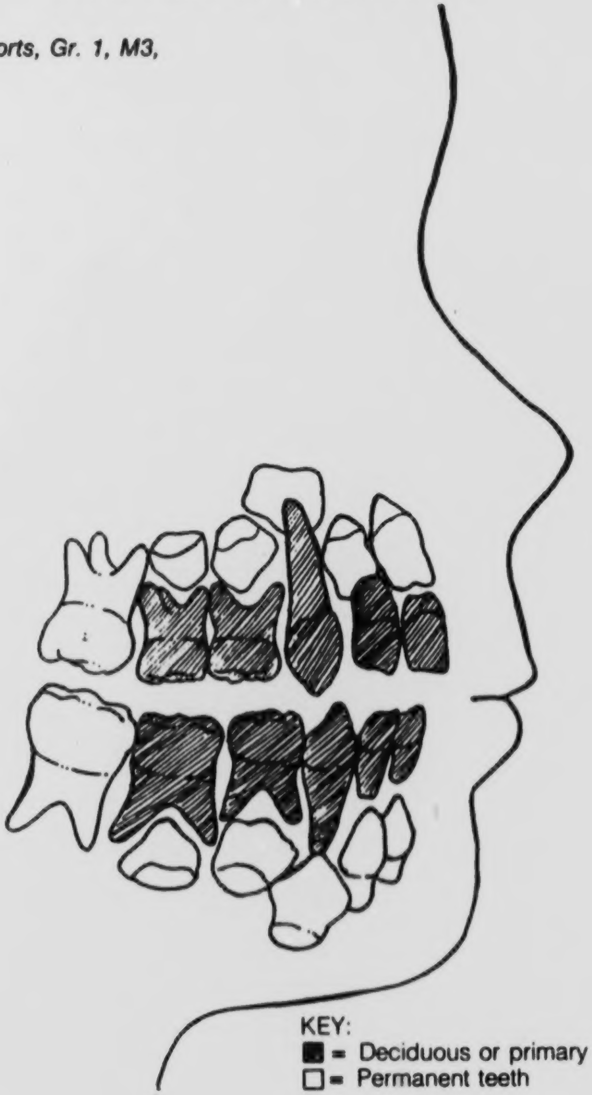
***Adapted from 'Dental Health: A Teacher's Guide K-12,' Health and Welfare Canada***

## PRIMARY (BABY) TEETH

*From Health Education, Dental Health Teaching Supports, Gr. 1, M3, Manitoba Education, 1986*


Central Incisor
Lateral Incisor
Upper Teeth
Cuspid
First Molar
Second Molar
Right
Left
Lower Teeth
Second Molar
First Molar
Cuspid
Lateral Incisor
Central Incisor

## LOCATION OF TEETH AT 6 YEARS OF AGE



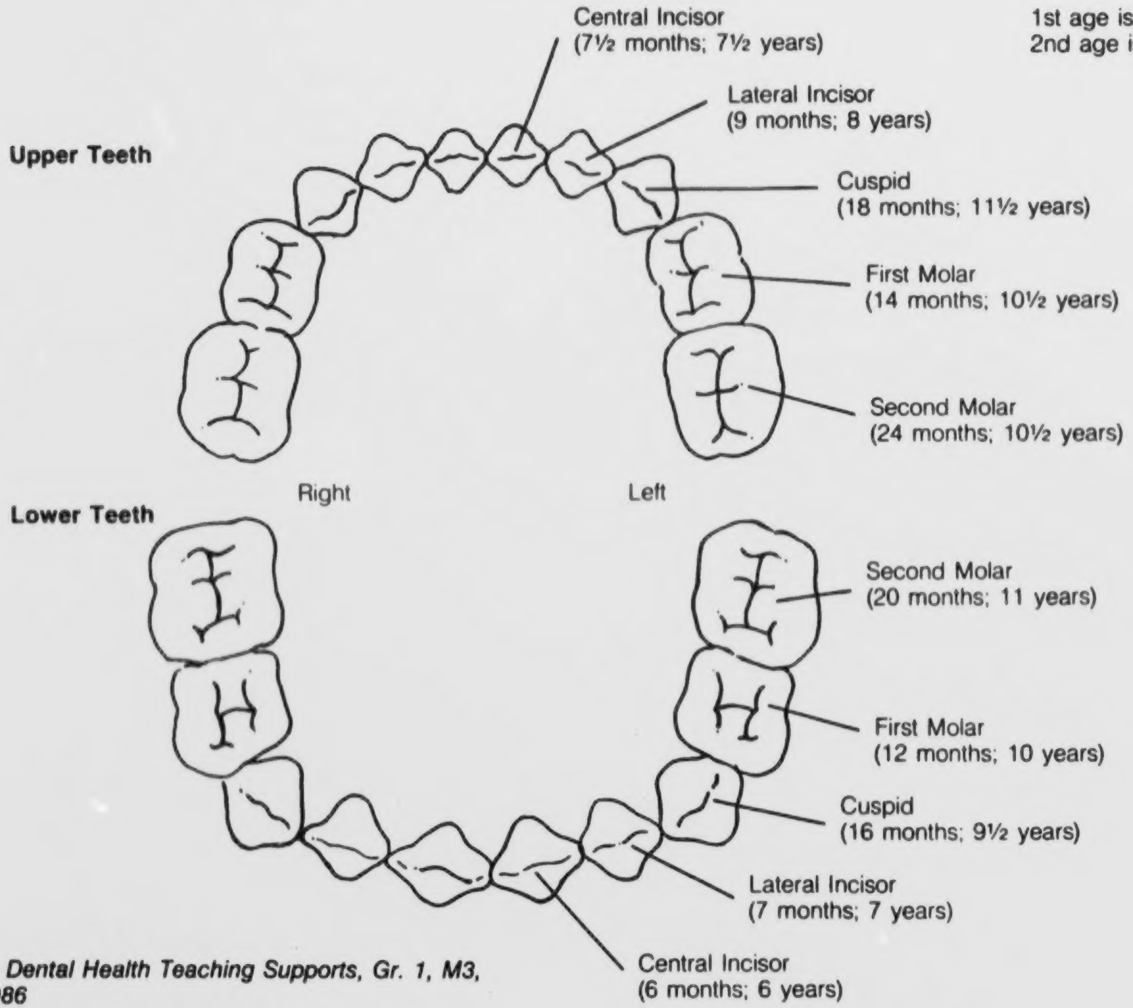
KEY:
■ = Deciduous or primary teeth
☐ = Permanent teeth

D56

## AGE SCHEDULE FOR PRIMARY TEETH

### PRIMARY (BABY) TEETH

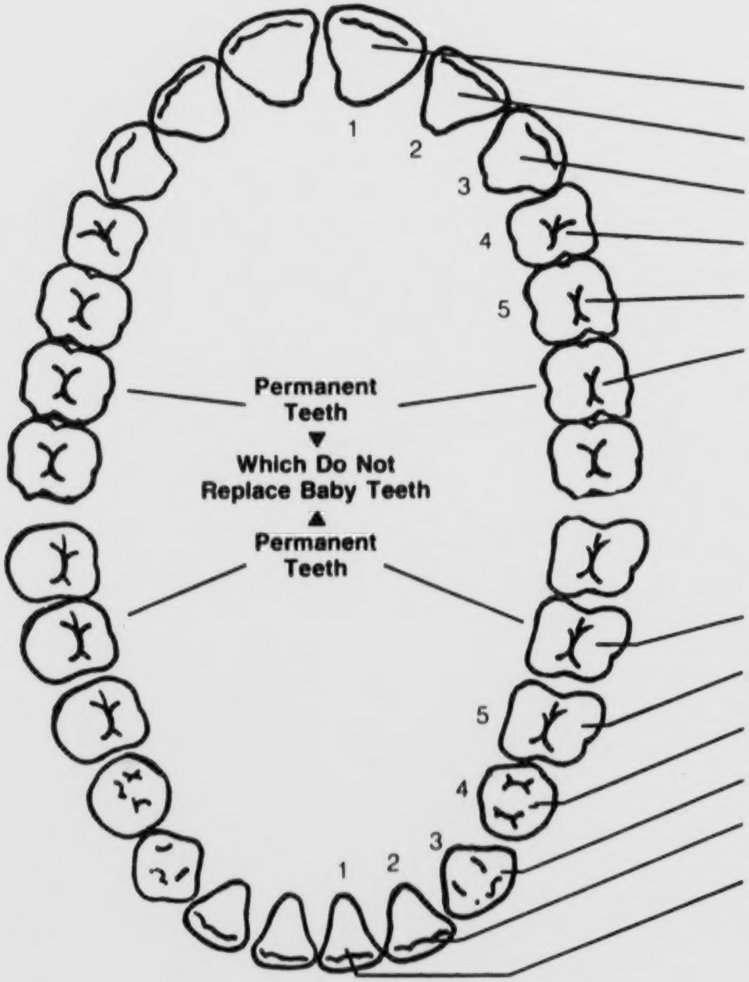
1st age is when tooth erupts (comes in)
2nd age is when tooth sheds (falls out)


Upper Teeth
Central Incisor (7½ months; 7½ years)
Lateral Incisor (9 months; 8 years)
Cuspid (18 months; 11½ years)
First Molar (14 months; 10½ years)
Second Molar (24 months; 10½ years)
Right
Left
Lower Teeth
Second Molar (20 months; 11 years)
First Molar (12 months; 10 years)
Cuspid (16 months; 9½ years)
Lateral Incisor (7 months; 7 years)
Central Incisor (6 months; 6 years)

*From Health Education, Dental Health Teaching Supports, Gr. 1, M3, Manitoba Education, 1986*

## AGE SCHEDULE FOR PERMANENT TEETH

(Teeth numbered 1 to 5 replace baby teeth)


1
2
3
4
5
Permanent Teeth
▼
Which Do Not Replace Baby Teeth
▲
Permanent Teeth
5
4
3
2
1

**Year That Teeth Come In**

7-8 years (Central Incisor)
8-9 years (Lateral Incisor)
11-12 years (Cuspid)
10-11 years (First Premolar)
10-12 years (Second Premolar)
5-7 years (First Molar)
12-13 years (Second Molar)
17-21 years (Third Molar)
17-21 years (Third Molar)
11-13 years (Second Molar)
6-7 years (First Molar)
11-12 years (Second Premolar)
10-12 years (First Premolar)
9-10 years (Cuspid)
7-8 years (Lateral Incisor)
6-7 years (Central Incisor)

*Note: Bicuspid is another term for premolar.*

## DENTALLY SAFE FOOD and DENTALLY UNSAFE FOOD

unsweetened fruit juice
unsweetened vegetable juice
raw vegetables and salads
raw fruits
nuts, seeds
cheese
plain milk
plain yogurt
enriched, whole wheat bread
  and bannock
whole grain cereals
crackers
bran muffin
pizza
popcorn
meats

raisins, dried fruits
ice cream, milkshakes
sweetened juice and canned fruits
flavoured yogurt
chocolate milk
puddings
popsicles/fudgsicles/revelos
sugar lumps
cake
candy
jam
chocolate bars
cookies
jelly, jam, honey
soft drinks (sweetened)
fruit drinks
sweetened powdered drink mixes
gum
lozenges

* Teeth should always be brushed after eating sticky food.

## TOOTHBRUSHING - REMOVAL OF PLAQUE

### How to Brush

Toothbrushing disrupts and removes plaque from the inner, outer and top surfaces of the teeth.

Place the toothbrush inside the mouth with the bristles along the upper last two teeth pointing at a 45° angle toward the gum line. This ensures that the bristles cover both teeth and gum surfaces.

Vibrate the brush in a slight back and forth or circular motion directing gentle pressure towards the gums. This movement keeps the brush alongside the same two teeth and allows some of the bristles to clean the surfaces under the edge of the gums. Do not scrub!

Count to ten and then, move to the next group of teeth.

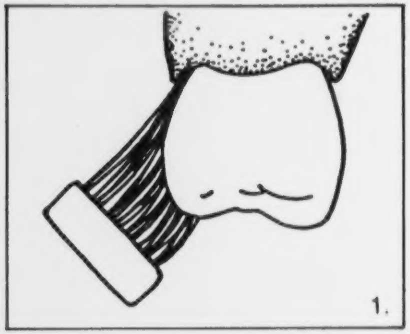
All inside and outside surfaces of teeth are cleaned in this way. The top surfaces of the back teeth are cleaned with a back and forth motion: the bristles directly on top of the teeth.

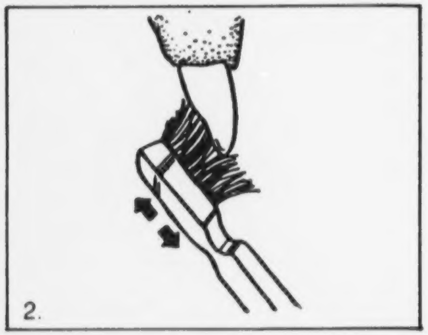
To ensure all surfaces are brushed, the same circuit is followed every time.

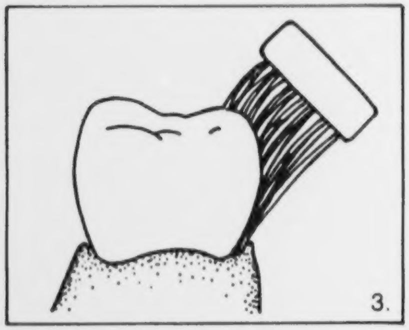
This is where toothbrushing should begin.

1. Position of brush for brushing upper inside back teeth.
2. Position of brush for brushing outside upper front teeth.
3. Position of brush for brushing lower inside back teeth.
4. Position of brush for brushing lower outside middle teeth.
5. Position of brush showing brushing of lower outside front teeth.
6. Position of brush showing brushing of top surface of back teeth.

*From: CDA, "Do It Yourself Oral Hygiene", 1981*


1.


2.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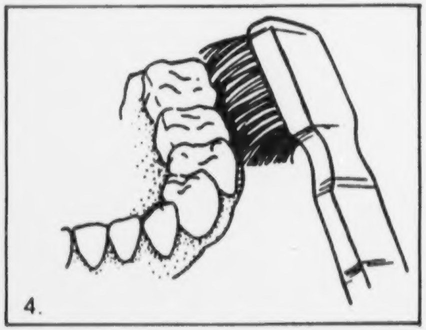
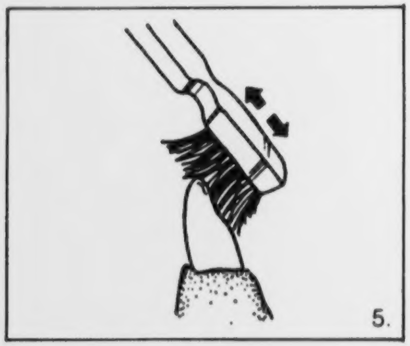

4.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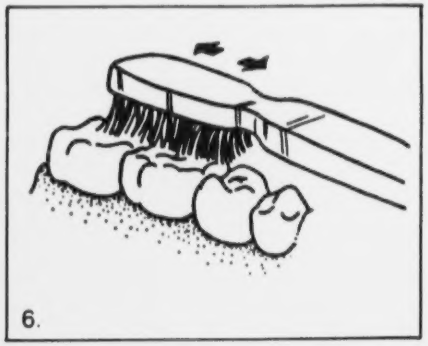

6.

## A BASIC TECHNIQUE FOR DAILY PLAQUE REMOVAL

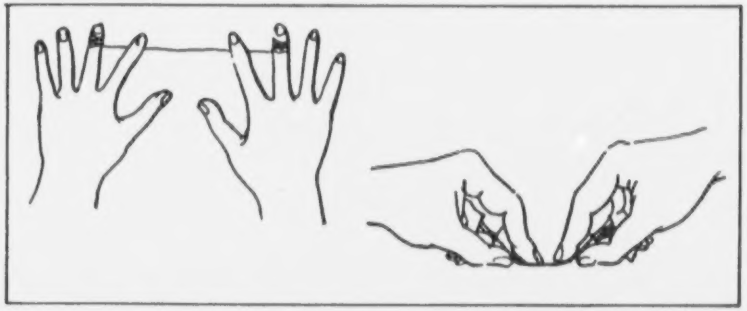
### Flossing - Removal of Plaque

### How to Floss

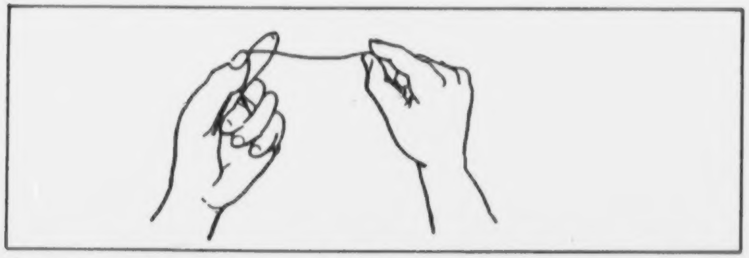
Flossing disrupts and removes plaque between the teeth and under the edges of the gums.

To floss properly, use about 46 cm of dental floss. Wind most of the floss around the middle finger of one hand and the rest around the middle finger of the other hand. This leaves about 8 cm free.

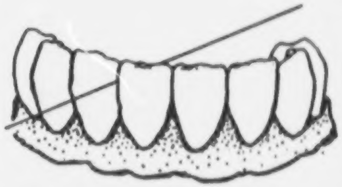
The free part of the floss is grasped with the thumbs and 1st fingers of each hand leaving about 2.5 cm as the 'working portion' of the floss.



When flossing lower teeth the floss is guided mainly by the 1st finger of each hand.



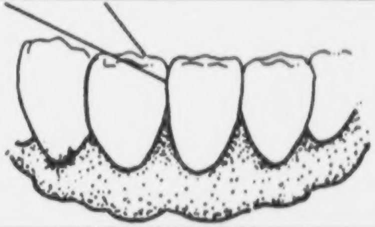
For upper teeth exert pressure with the thumb of one hand and the forefinger of the other hand.



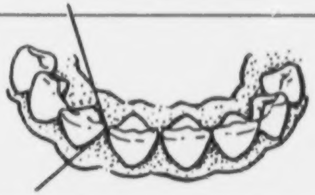
A gentle sawing motion is used to insert the floss between teeth. Curve the floss into a C-shape around the surface of one tooth and gently work the floss under the gums until a slight resistance is felt.

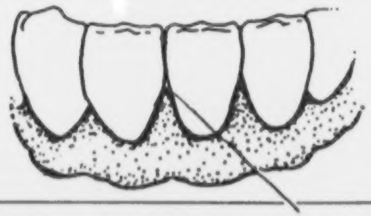
Holding the floss against the tooth in a C-shape, move the floss up and down several times.

Clearly shows the "c" shape that is necessary to attain



(When all the plaque has been removed, the floss rubbing against the tooth often makes a 'squeaky-clean' sound.)





Repeat the procedure on the adjacent tooth surface at the same site.

This method is repeated on the remaining teeth starting on the upper right teeth and ending on the lower left teeth.

*From CDA, "Do It Yourself Oral Hygiene", 1981*

**D61**

# GRADE 1

# FAMILY LIFE

## THE FAMILY LIFE UNIT

### INVOLVEMENT OF PARENTS

Parents are the primary educators of their children on family life education. Schools should play a supporting role to supplement parental education.

Generally, most parents support family life education in school. However, they may have a number of questions about the program before they will give that support. For that reason, it is vital for schools to involve parents in discussing the unit, before using the materials.

Parents must be given an opportunity to find out what will be taught in the lessons, to meet the teachers (and other resource people) who will be delivering the program, and to ask questions. This can be done most effectively by holding a parent information session.

This should include:

- the principal of the school
- teachers who will be teaching the lessons
- any resource people, such as the community health nurse, who might be involved with the lessons.

Most parents attending the meeting want to find out about the content, objectives and methods used in the unit. Basic information during the session should include:

- a brief outline of the program
- a sample of some of the activities in which students will participate
- sample handouts
- copies of any activities in which parents will participate during the evening
- translation of goals, etc., as necessary
- viewing of any films which may be used

It is important to emphasize that the purpose of the Family Life unit is to support, and not to replace, the parent or family role and responsibility. The parent information session is one important way for teachers to show that they want and welcome parental support, involvement and concern.

Parent meetings are often a good opportunity to initiate ongoing parenting groups. Parents may decide to meet regularly during the year to discuss topics related to Family Life or other health programs in the school. The G.N.W.T. Family Life Education Consultants may be able to assist in the development of parent groups.

Following the meeting, parents will be able to decide whether they want their children to be involved in the lessons.

PARENTS, WHO DO NOT WISH THEIR CHILD(REN) TO PARTICIPATE IN THE LESSONS, MAY INDICATE TO THE SCHOOL THAT THEY WILL BE WITHDRAWING THEIR CHILD(REN) FROM THIS PARTICULAR UNIT. PARENTS MUST MAKE THE FINAL DECISION.

Schools must make alternative arrangements for students who are withdrawn from these classes.

In order to withdraw their child(ren) from the classes, parents must sign a withdrawal form (see sample).

---

**FAMILY LIFE CLASSES**

NAME: ____________________________________.

GRADE: ___________________________________.

I do not wish ______________________________ to participate in the Family Life classes which will be offered by the school in the near future.

________________________________________
Parent/Guardian signature

________________________________________
Date

Because of the need to foster a positive classroom atmosphere, teachers need to take time to get to know their students before teaching the Family Life unit. For that reason, teachers should teach the Mental and Emotional Well-Being and the Growth and Development units first. Many of the skills which students will be developing in the Mental and Emotional Well-Being unit, such as decision-making skills, communication skills, relationship-building and coping skills, will assist in the development of an atmosphere conducive to effective family life education.

**FAMILY LIFE**

GRADE: 1 LESSON: 1 THEME: FAMILIES

CONCEPT: EACH FAMILY HAS DIFFERENT MEMBERS

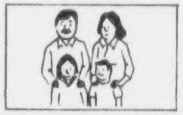
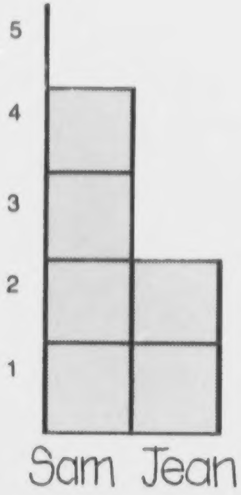
PREPARATION:
1. Invite two family groups to come to the class
2. "These Are The People In My House" song (Activity Sheet FL1)
3. Prepare a class set of My House worksheet (Activity Sheet FL2)
4. Many small squares (all the same colour) to make a graph
5. Prepare a large number of Family Album worksheets (Activity Sheet FL3)

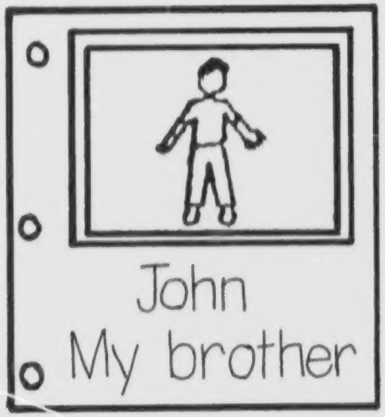
VOCABULARY: mother, father, brother, sister, (plus any others students identify living in their house)

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | The next three lessons relate to Social Studies, Grade 1, Topic B: I Live With My Family. If you have already taught this concept and its related objective in Social Studies, it is sufficient to review the material in this lesson with students. If you have not taught this specific objective before, you should teach the whole lesson. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Today, family structures vary greatly in size and composition. It's important that students recognize and accept different structures. Structures might include:<br>- the nuclear family<br>- one parent family<br>- extended family<br>- adopted family<br>- foster family<br>- blended family<br>In some native languages in the N.W.T., there is no word to describe the concept of a nuclear family. The concept of a family is that of an extended family and includes family members who do not live in the same house. Family members who live in the house may include people who are not blood relatives. They are "adopted" into the family. |
| i) identify family members with whom they live | 1. Identify family members who live with two students. | Prior to the lesson, invite the household members of two students' families to visit the class. Have students identify all the people who live in each house. Choose families with different structures, if possible. Record the information using a pocket chart and the sentence pattern as illustrated.<br>Jamie's mother \| lives in his house<br>Mary's sister \| lives in her house |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 2. Identify family members who live in their own house. | In preparation for the next activity, have students think about who lives in their house. Family members might include:<br>- mother<br>- father<br>- brother<br>- sister<br>- grandmother<br>- grandfather<br>- aunt<br>- uncle<br>- cousin<br>In many native homes, "cousins" are called "brothers" or "sisters." |
| | 3. Learn 'These Are The People Who Live In My House' song. | Refer to Activity Sheet FL1. |
| | 4. Make a mural of "Family Members." | Refer to Activity Sheet FL2.<br>Have each student cut out an outline of a house shape to paste on the mural. Give each student flat popsicle sticks or tongue depressors. On each stick they have to draw someone who lives in their house and paste it on the house, until all the people they live with are in the house. (Don't forget themselves!) Leave lots of room around the mural. Students will be adding to it in the next lesson. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 5. Count how many people live in their own house. | Have each student count the number of people who live in their house. Record their responses using a pocket chart and the sentence pattern as illustrated.<br>4 people \| live in my house \|  |
| | 6. Make a graph of the number of people in their house. | Have a large number of small squares ready to make a graph. Give each student one square for each person who lives in their house. (All the squares should be in the same colour.) Make the squares into a strip for each student. Paste each strip on to make a graph.<br> |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 7. Begin to make a Family Album. | Refer to Activity Sheet FL3.<br>Give students one Family Album worksheet for each person who lives in their house. On each page they have to draw a picture of one person, write that person's name and the relationship. Some students might be able to write the sentence pattern on each page:<br>My ________________ lives in my house.<br>Make the drawings into a book to which more pages can be added.<br> |

# THESE ARE THE PEOPLE WHO LIVE IN MY HOUSE

1. These are the people who live in my house....
   Live in my house, live in my house;
   These are the people who live in my house;
   Live in my house.

2. My mother (name) lives in my house....

3. My father (name) lives in my house....

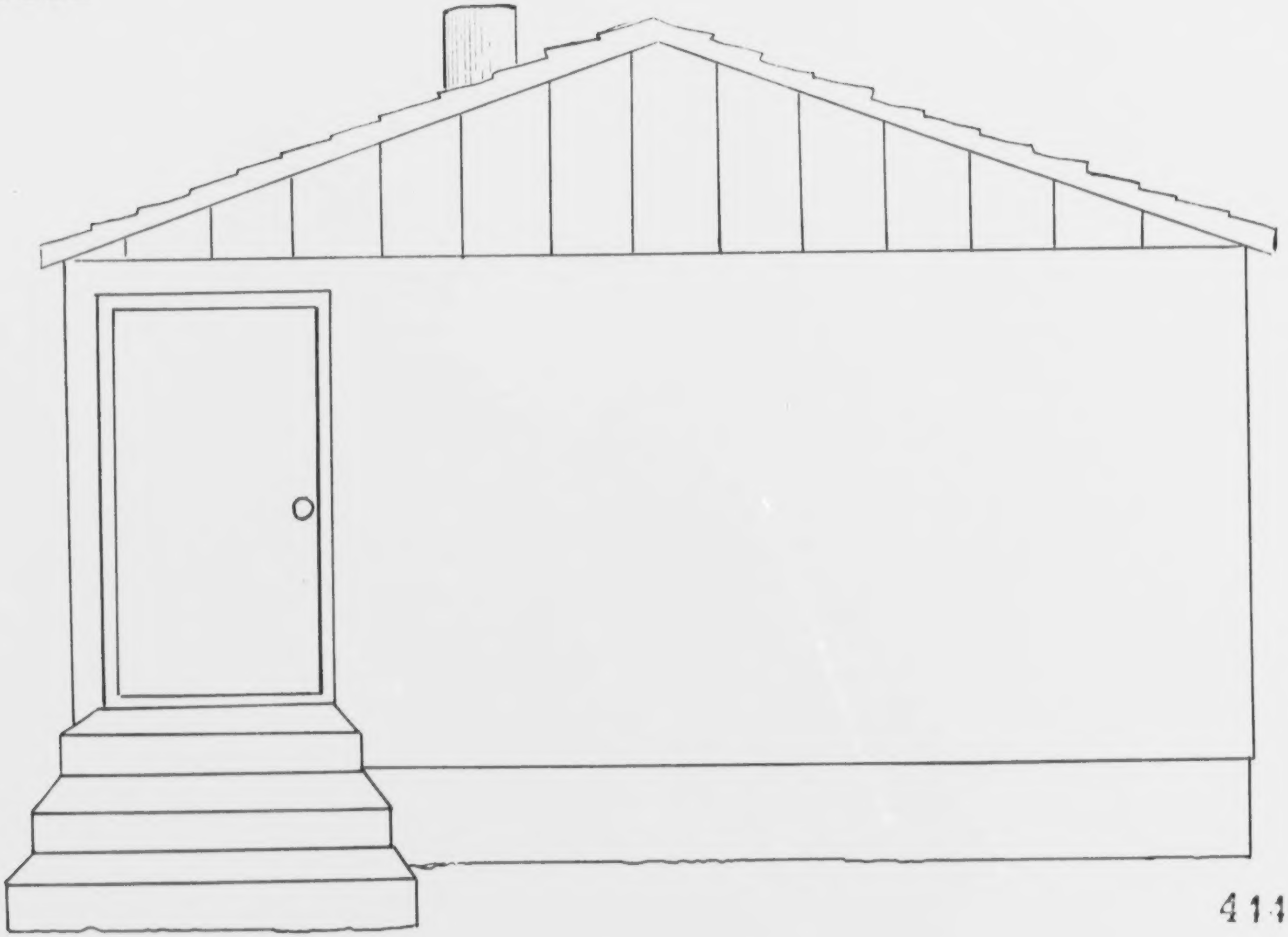
4. My grandmother (name) lives in my house....

5. My brother (name) lives in my house....

6. My uncle (name) lives in my house....

(Tune: Here We Go Round The Mulberry Bush)
(Teacher will have to help students make up verses to match their Family Albums)

# MY HOUSE



414

413

**FAMILY ALBUM**

FL3

**FAMILY LIFE**

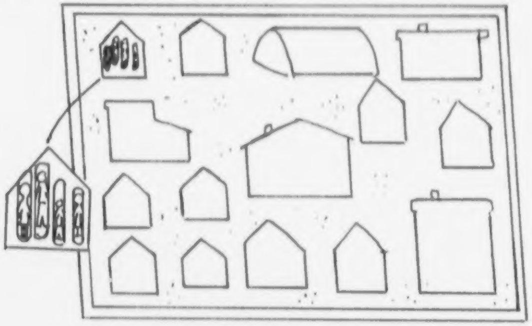
GRADE: 1 LESSON: 2 THEME: FAMILIES

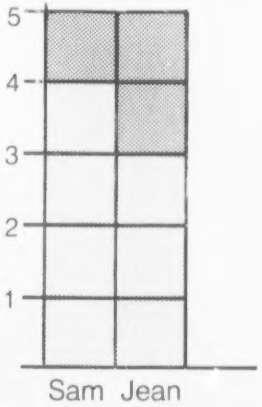
CONCEPT: EACH FAMILY HAS DIFFERENT MEMBERS

PREPARATION:
1. Popsicle sticks/string or yarn for the mural in Student Activity 3
2. Many small squares (all the same colour) to make a graph
3. Prepare enough Family Album worksheets (Activity Sheet FL3 from Lesson 1) for the extended family members of each student
4. Invite family members for tea

VOCABULARY: family, grandmother, grandfather, uncle, aunt, cousin (any others which students identify)

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify extended family members | 1. Name family members who live in their house. | This is a review of Lesson 1. |
| | 2. Identify family members who live elsewhere and where they live. | Have students think about family members who do not live in their house. Identify some of these using a pocket chart and the sentence pattern as illustrated.<br>My grandmother \| lives \| near The Bay<br>My grandmother \| lives \| in Coppermine |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Family members may include:<br>- grandmother<br>- grandfather<br>- uncle<br>- aunt<br>- cousin<br>- sister or brother adopted to another family or away at school |
| | 3. Add extended family members to the mural from Lesson 1. | This is continued from Lesson 1. Give students more popsicle sticks. On each stick they have to draw a member of their family who lives somewhere other than their house. (Family members who were not included in the previous mural.) Paste each popsicle stick on a piece of paper and put it on the wall around the edge of the mural. Attach with a string to the student's house.<br><br>FAMILY MEMBERS |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 4. Add extended family members to the graph from Lesson 1. | Give students one square for each family member who lives somewhere other than their house. Have them add these squares to their strips on the graph from Lesson 1. The squares should be a different colour from those in the previous lesson.<br><br> |
| | 5. Complete their Family Albums by adding extended family members. | Refer to Activity Sheet FL3.<br>Have students draw a picture of each of their extended family members on a Family Album worksheet. Add these to the books from Lesson 1, Student Activity 7. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 6. Share one picture from their Family Album with other students. | Have students pick one picture from their Family Album to share with the rest of the class. Encourage students to tell who the person is and where they live, using the sentence patterns. Record their responses using a pocket chart as illustrated:<br>My grandfather<br>lives<br>near the Bay |
|  | 7. Host a "Family Day." | Invite students' families to come for tea. Have students introduce family members. (Teachers will have to ensure that each child has a family member come. It may be possible to bring in a brother or a sister from another class in the event that no other family members come.) Share the mural and Family Albums with the visitors. |

**FAMILY LIFE**

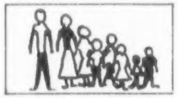
GRADE: 1　　LESSON: 3　　THEME: FAMILIES

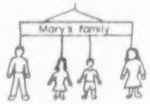
CONCEPT: THERE ARE SIMILARITIES AND DIFFERENCES IN FAMILY STRUCTURES

PREPARATION: 1. "Families" poem (Activity Sheet FL4)　　2. Graph from Lessons 1 and 2
3. Pocket chart and drawing materials for Student Activity 3
4. Family Stories and flannelboard outlines (Activity Sheets FL5A, 5B, 5C)
5. Family drawings on large cards (Activity Sheets FL6A, 6B, 6C) and one set for each student on small cards (FL6D)　　6. Materials to make mobiles

VOCABULARY: same, different, big, biggest, small, smallest, males, females

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify similarities and differences in family structures | 1. Listen to the "Families" poem. | Refer to Activity Sheet FL4.<br>Discuss. |
| | 2. Identify the biggest family and the smallest family. | Using the graphs from the previous lessons, identify the biggest and smallest families. Emphasize that there are big families and small families. They are all families. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Decide if they have a big family or a small family. | Have each student count the number of family members s/he has. Have them decide what size their family is. Record their responses using a pocket chart and the sentence pattern as illustrated.<br>My family is big <br>You may wish to have students make stick figure drawings of each family member (see illustration) to show graphically how big/small their family is. |
|  | 4. Compare different family structures. | Refer to Activity Sheets FL5A, 5B, 5C.<br>Using flannelboard outlines, tell the "Family Stories". As you tell each story, put the family members on the flannelboard. Use the same outline for similar relationships, e.g., all brothers have the same outline. Compare all the family structures. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) identify male/female members of families | 5. Identify male/female members of the families in the Family Stories. | Ensure that students understand the terms "male" and "female." Point to outlines and have the class label each as male/female. |
| | 6. Count male/female members of the families in the Family Stories. | Have students count how many males/females there are in each family. Record their responses using a pocket chart and the sentence pattern as illustrated:<br>_____'s \| family has \| ____males |
| | 7. Match pictures of similar family structures. | Refer to Activity Sheets FL6A, 6B, 6C, 6D.<br>Turn the two sets of Family Drawings on large cards face down on a table or on the floor. Have two students each turn up one card. Students have to look at the cards to see if they match. Do this a number of times.<br>Then give each student one set of the Family Drawings on small cards. Turn up one of the large cards and show it to students. Students then find the matching card from theirs and hold it up. |
| | 8. Make a family mobile. | Students draw and cut out all the members of their family and make the figures into a mobile.<br> |

FL4

# FAMILIES

My family is big as big can be -
There's mum and dad and sister, Lee.
There's my brother Joe and his new wife, Bea.
There's grandma and grandpa
And, of course, there's me!

My other grandparents live far away
So we don't see them everyday.

My friend's family is very small,
Just Johnny, his dad and brother Paul!

But no matter who and no matter where
A family means sharing, love and care!

Heather Nolsoe

# FAMILY STORIES

1. Lucy's family

Lucy's family is big.
Lucy's mother, father and
brother live in her house.
Her two grandmothers and
two grandfathers live in Edmonton.
Her uncle and two aunts live in
Coppermine.

2. Mary's family

Mary's mother and grandmother
live in her house. Her uncle and
aunt live in a house near the Bay
store. Her other aunt lives in
Yellowknife. Her family is small.

3. John's family

John's mother, father and sister live
in his house. His three aunts live with
his grandmother. His other grand-
mother and grandfather live in
another house.

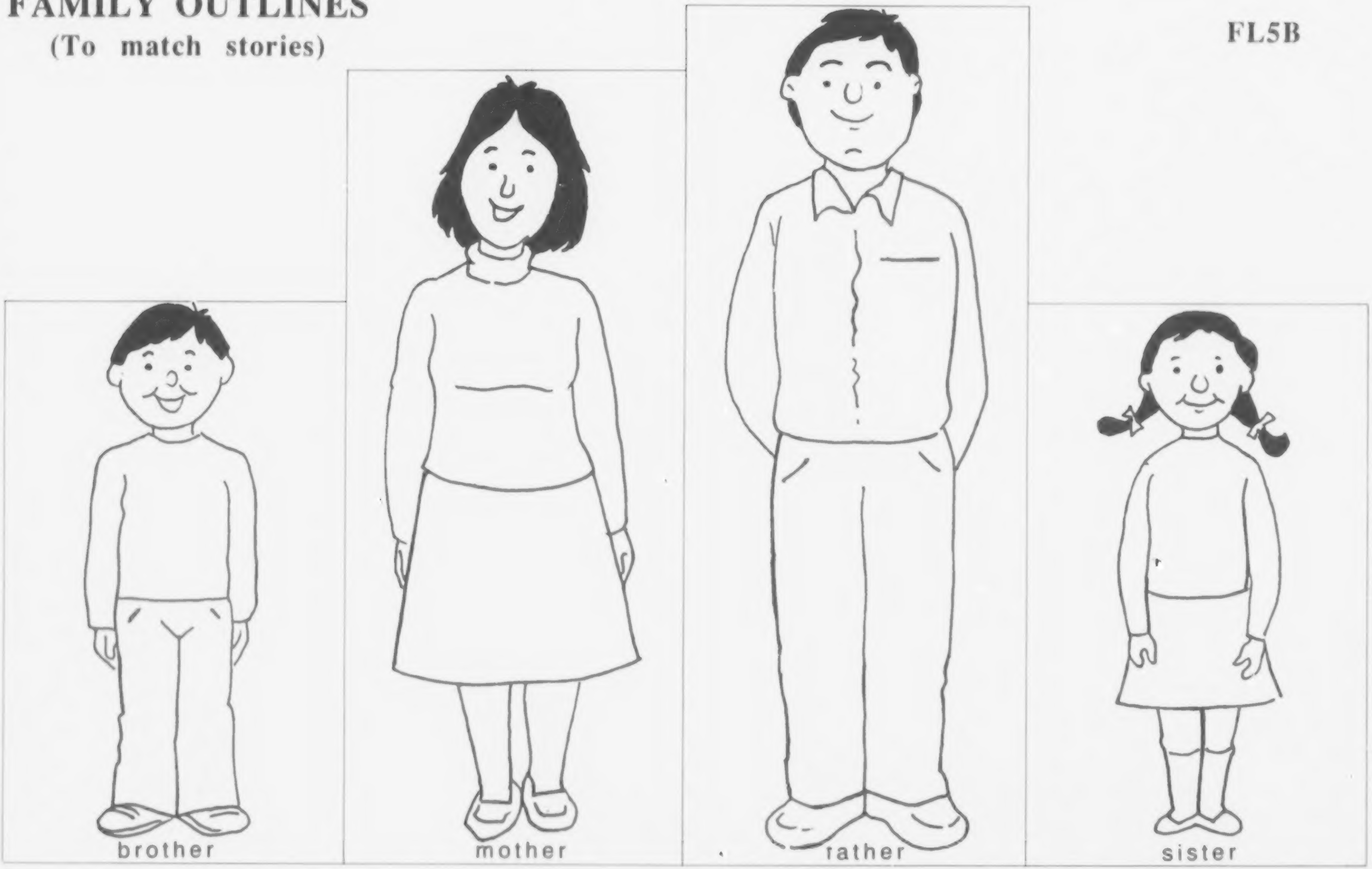
4. Jack's family

Jack's grandmother lives in his
house. His two sisters and his
brother live in another house.

# FAMILY OUTLINES

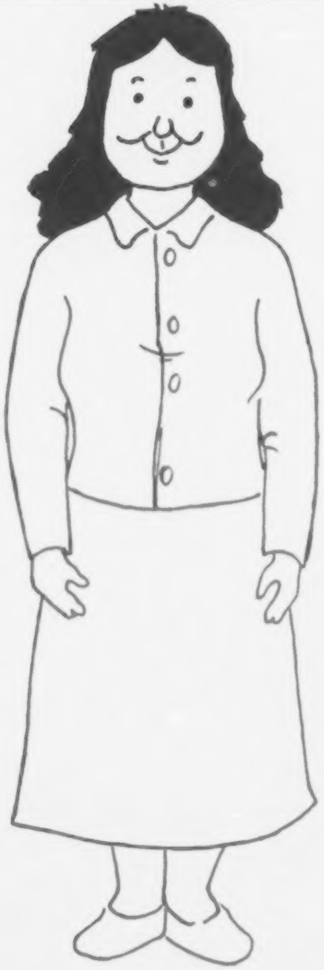
(To match stories)

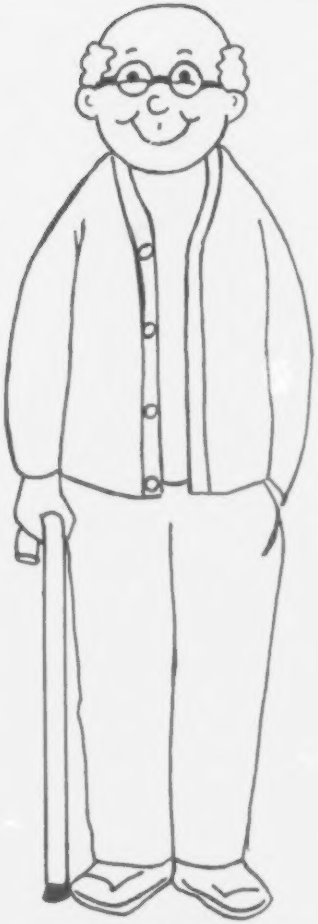
FL5B

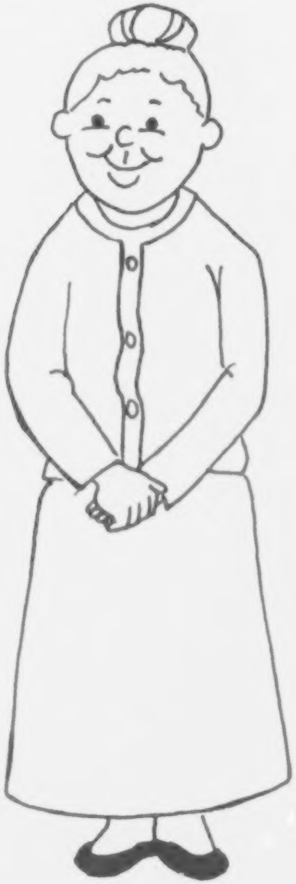

brother
mother
father
sister

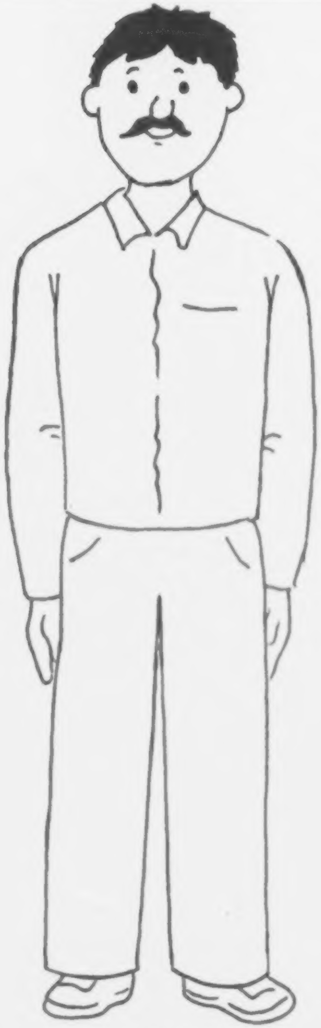
FL5C

# FAMILY OUTLINES
## (To match stories)

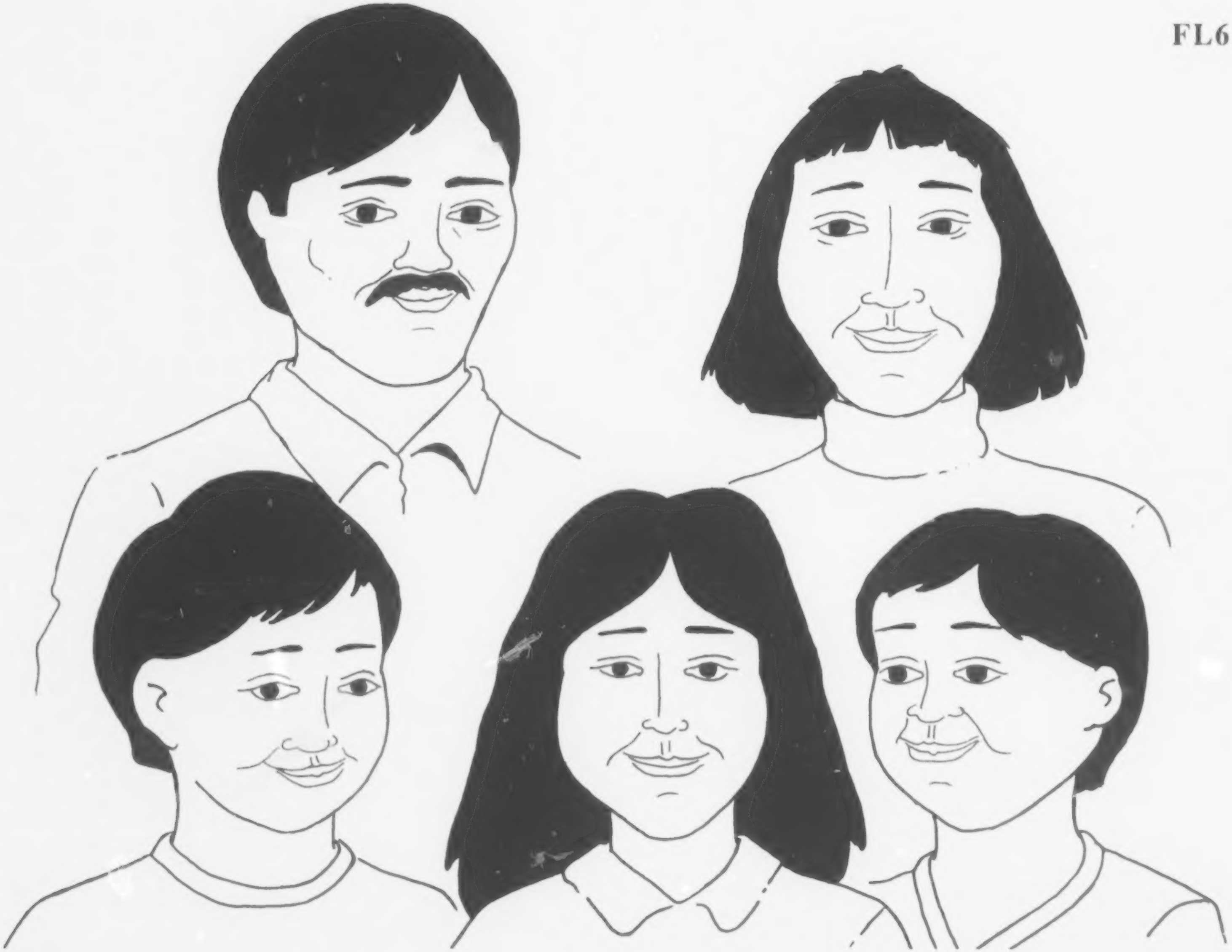

aunt


grandfather

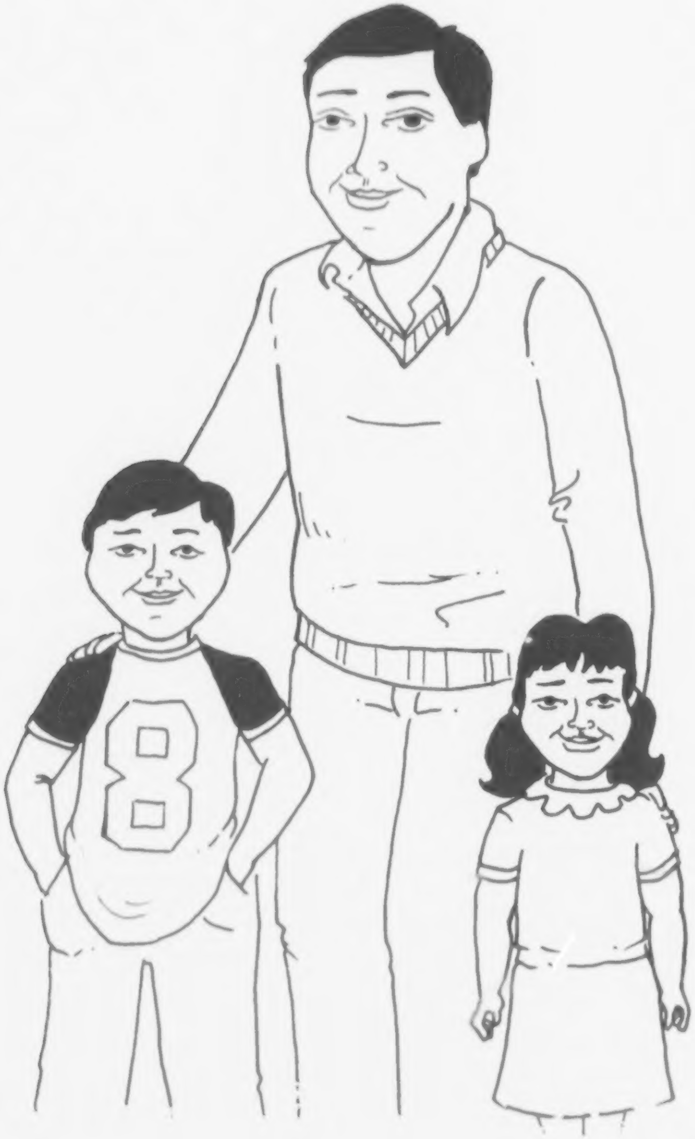

grandmother


uncle

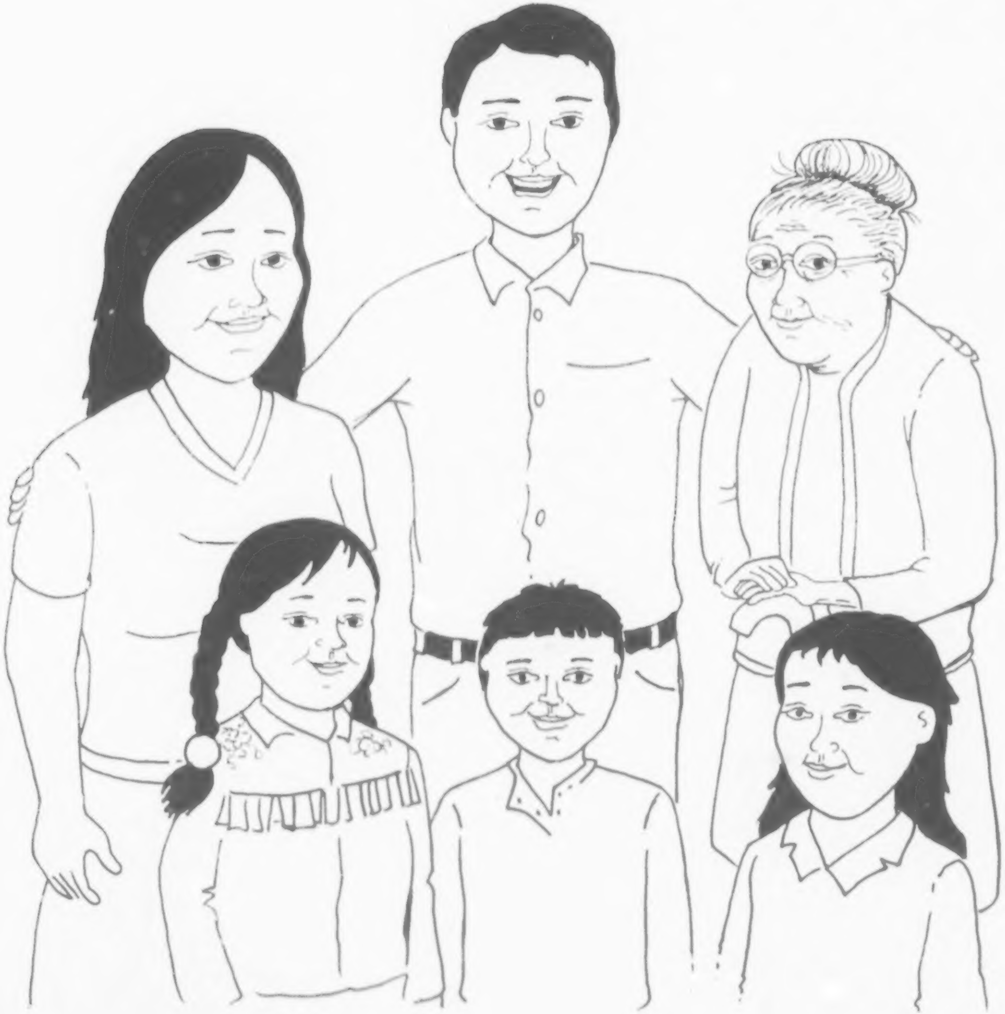
FL6A



FL6B

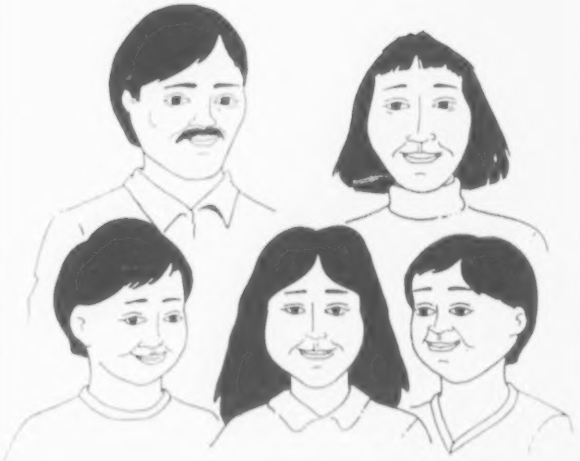


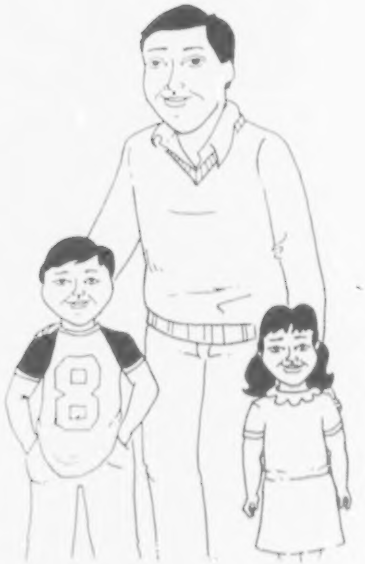
FL6C

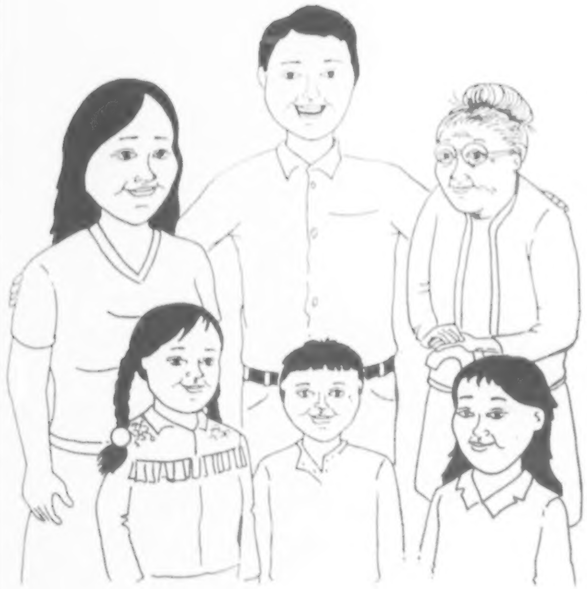


FL6D

# FAMILY DRAWINGS







**FAMILY LIFE**

GRADE: 1 LESSON: 4 THEME: HUMAN DEVELOPMENT AND REPRODUCTION

CONCEPT: THE BODY HAS MANY PARTS

PREPARATION:
1. Picture of a nurse or a doctor
2. Overhead transparency and projector (Activity Sheet FL7)
3. Prepare a class set of Our Bodies worksheet (Activity Sheet FL8)

VOCABULARY: penis, vulva, navel, belly button, neck, backside, buttocks

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) name the external body parts that differ between boys and girls | 1. Review the body parts. | Refer to Growth and Development, Grade 1, Lesson 1. Include:<br>- head, eyes, ears, nose, mouth<br>- shoulders<br>- chest<br>- stomach<br>- legs, knees, feet, toes<br>- arms, hands, fingers |
| | 2. Play "Simon Says, Touch Your ________." | |

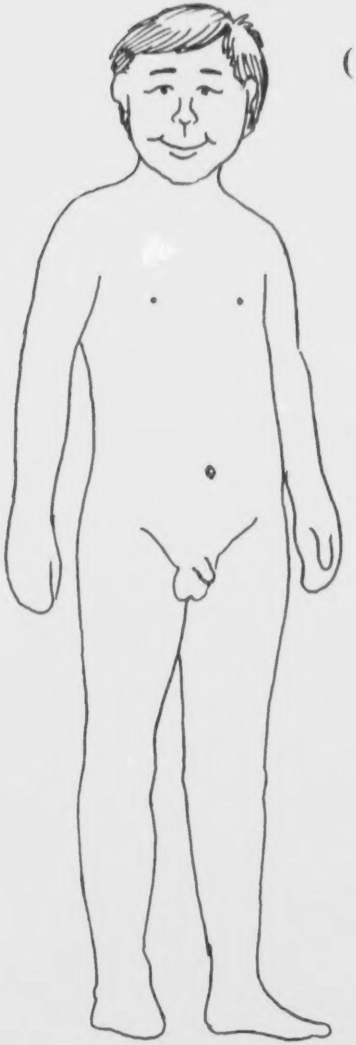
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Brainstorm other body parts. | Teachers may have to lead the students to name body parts that are not included in Activity 1. During the brainstorming, allow students to use their own names for the body parts. Be sure the list includes some term for:<br>- navel<br>- buttocks<br>- penis<br>- vulva (vulva is the opening to the vagina, which is an internal body part)<br>Make a list with a picture of a doctor or nurse at the top. Explain to the students that doctors and nurses use special names for some parts. These are the names which will be used in the class.<br> <br>penis<br>vulva<br>buttocks<br>navel |
|  | 4. Name the body parts that differ between boys and girls. | Refer to Activity Sheet FL7.<br>Show the students one body on the overhead. Ask them to identify if it is a boy or a girl. Ask them how they can tell. Then do the same for the other body. |

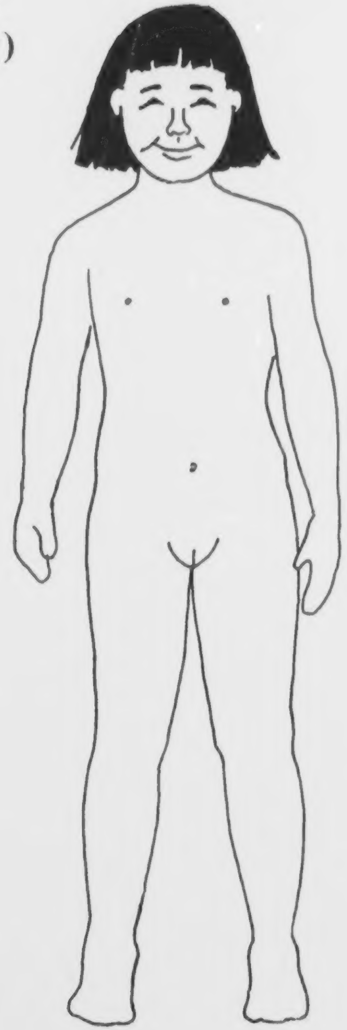
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 5. Complete "Our Bodies" worksheet. | Refer to Activity Sheet FL8.<br>Have students draw lines to match the labels in the centre of the worksheet to the correct body parts on both the boy and the girl. Be sure students have a model to follow. |

**FL7**

# OUR BODIES

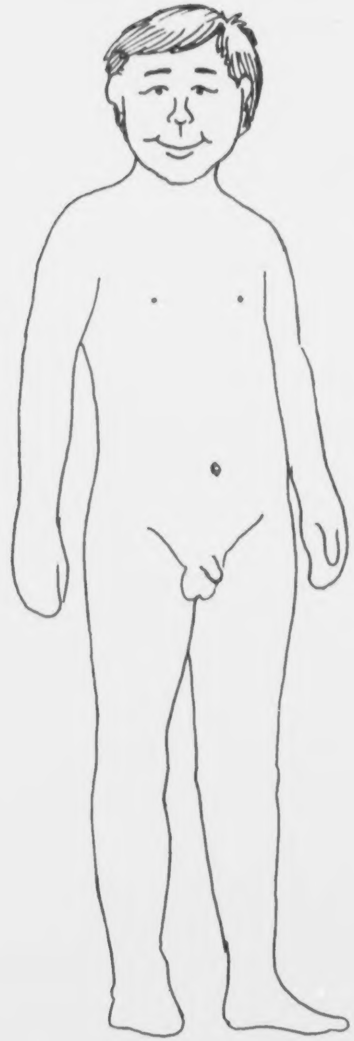
(overhead transparency)





FL8

# OUR BODIES



chest

head

stomach

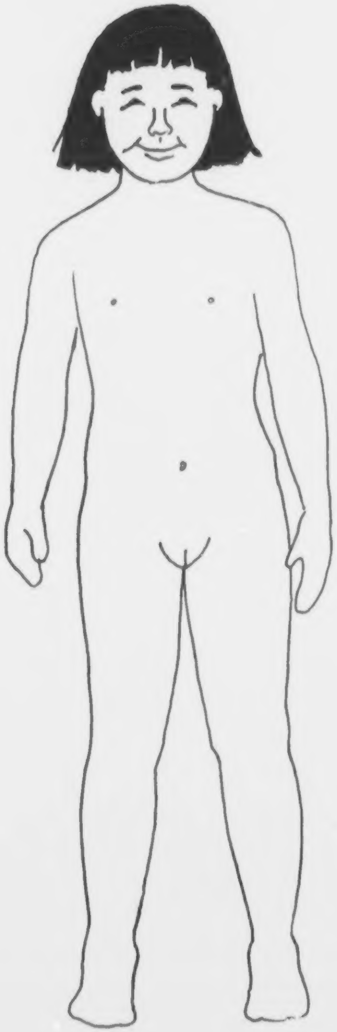
navel

legs

penis

vulva

neck



FAMILY LIFE

GRADE: 1 LESSON: 5 THEME: ABUSE PREVENTION

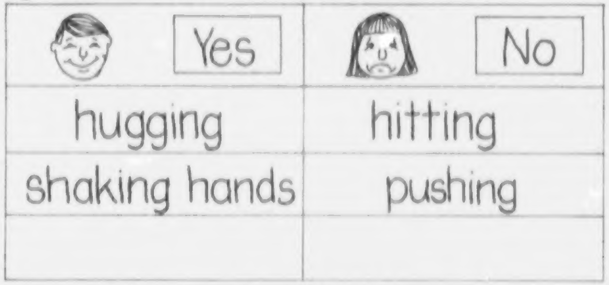
CONCEPT: TOUCH PRODUCES DIFFERENT FEELINGS

PREPARATION:
1. Make puppets from puppet outlines (Activity Sheets FL9A, 9B)
2. Puppet dialogue (Activity Sheet FL10)
3. Pocket chart and sentence strips
4. Prepare a class set of Touches worksheet (Activity Sheet FL11)

VOCABULARY: touch, feelings, hugging, kissing, pushing, hitting, kicking

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) identify the feelings associated with touch | Students:<br>1. Identify different kinds of touches. | Refer to Activity Sheets FL9A, FL9B and FL10.<br>Read Part 1 of the dialogue. Emphasize that there are many different kinds of touches:<br>- hitting, kicking, pushing, punching<br>- hugging, kissing, tickling, shaking hands |

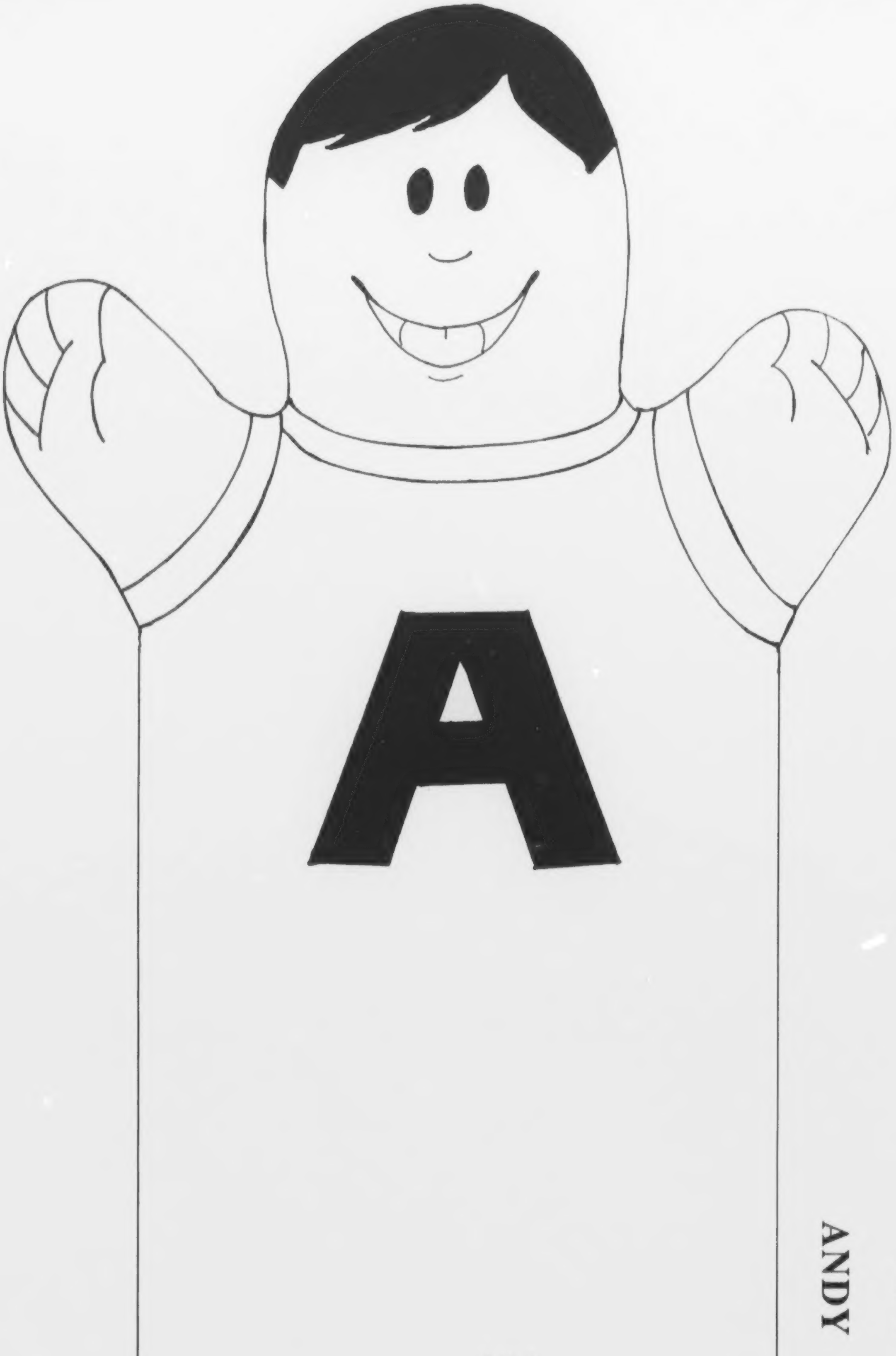
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 2. Identify feelings associated with touch. | Refer to Activity Sheet FL10.<br>Read Part 2 of the dialogue. Explain that there are touches that people like and touches that people don't like. If we like the touch, it gives us a "yes" feeling. If we don't like it, it gives us a "no" feeling. |
|  | 3. Brainstorm touches that give them "yes" feelings and touches that give "no" feelings. | Make a list with students of the kinds of touches that give them "yes" feelings and the kinds of touches that give them "no" feelings. Use a pocket chart as illustrated. |



| Yes | No |
|---|---|
| hugging | hitting |
| shaking hands | pushing |
|  |  |

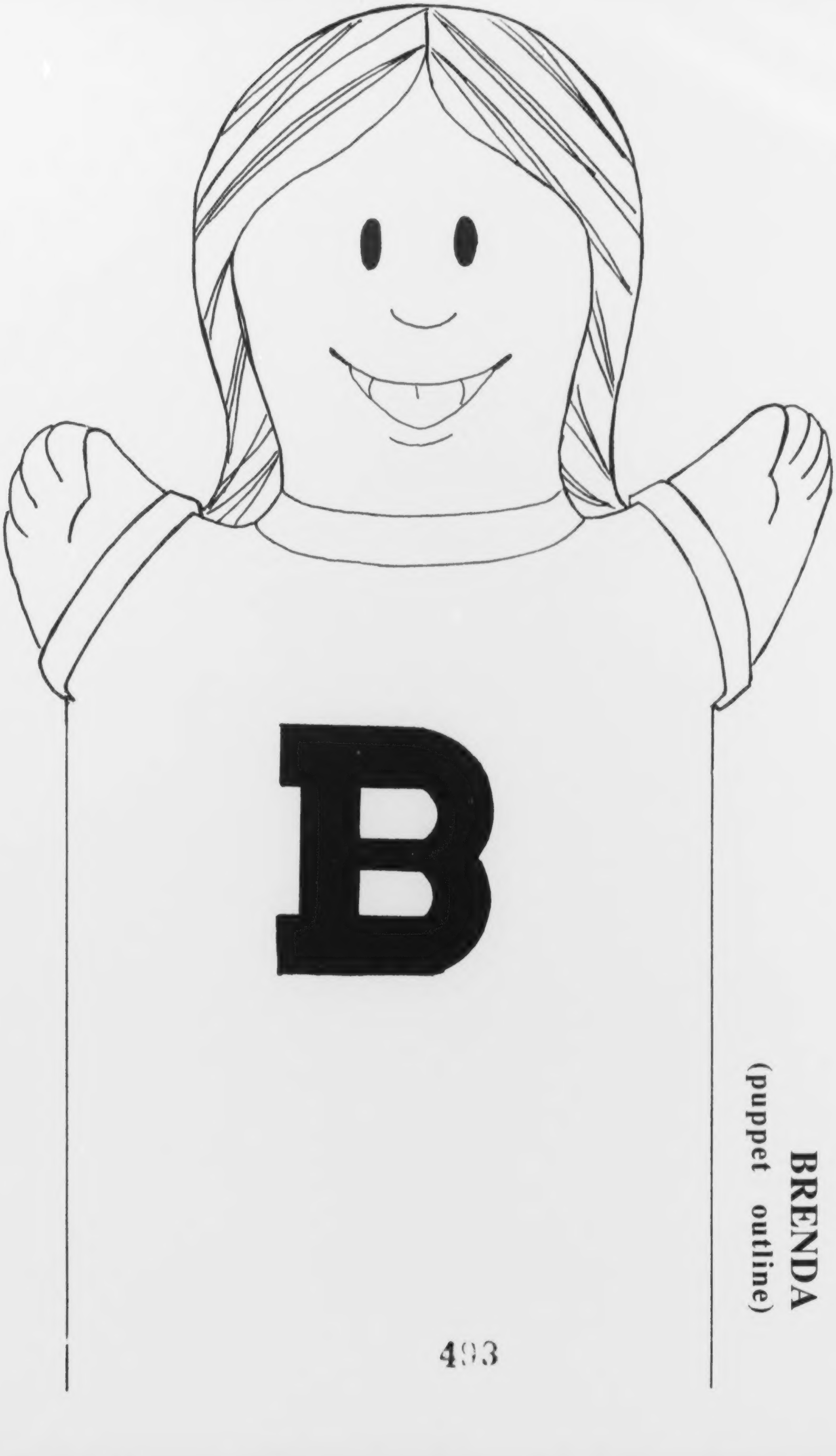
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Describe how the feelings associated with touch vary with particular situations. | Refer to Activity Sheet FL10.<br>Read Part 3 of the dialogue. Emphasize that feelings may differ depending on whether:<br>- the child knows the person<br>- the child knows the person well<br>- the child likes the person<br>e.g., a kiss from mother produces a "yes" feeling, while a kiss from a stranger gives a "no" feeling<br>- what body parts s/he touches |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) state rules to follow in various situations | 5. State rules to follow in various situations. | Refer to Activity Sheet FL10.<br>Read Part 4 of the dialogue. Have students give you the rules to use if they have a "no" feeling. Record their responses using a pocket chart and the sentence patterns as illustrated.<br>You can say no<br>You can say stop doing that<br>You can tell an adult you trust |
|  | 6. Complete Touches worksheet. | Refer to Activity Sheet FL11.<br>Students have to match a happy face or a sad face to pictures illustrating different kinds of touches. Be sure they understand the happy face represents "yes" feelings and the sad face represents "no" feelings. Discuss their work afterwards. |



ANDY

FL9A



FL9B

**BRENDA**

(puppet outline)

FL10

# ANDY AND BRENDA TALK ABOUT TOUCHING

Have students respond to the questions.

## Part 1

Andy: Hello boys and girls. My name is Andy. This is my friend Brenda.

Brenda: Hi, everyone! How are you?
{Puppets put arms around each other.}

Andy: We're going to talk about something everyone does - touching! Look! Brenda and I are touching each other right now. What are we doing?

Brenda: Look, here's another kind of touch. What are we doing?
{Puppets shake hands.}
{Puppets demonstrate hugging, kissing, punching, slapping, hitting, etc.}

## Part 2:

Andy: You know sometimes when people touch me, I like it. It gives me a "yes" feeling.

Brenda: Right. When my friend hugs me, I feel great!

Andy: But sometimes I really hate it! It gives me a "no" feeling.

Brenda: Yes. Once when I was going to school, a big kid pushed and shoved me. I had a "no" feeling.

## Part 3

Brenda: Andy, sometimes when someone hugs me, I get a "no" feeling. My dad's friend came to visit and he gave me a hug. I didn't know him, so didn't like getting a hug from him at all.

Andy: Yes. Sometimes people I don't know very well try to kiss me, 'cause they think I'm cute. That gives me a "no" feeling.

## Part 4:

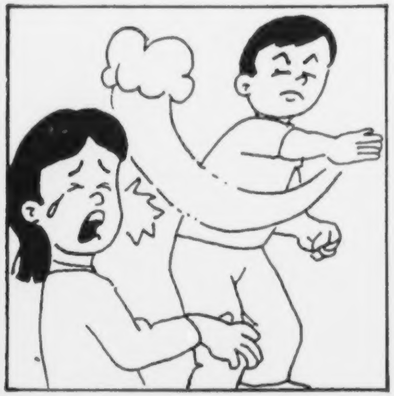
Brenda: My mother told me some rules to follow (you know, things I should do) if I have a "no" feeling.

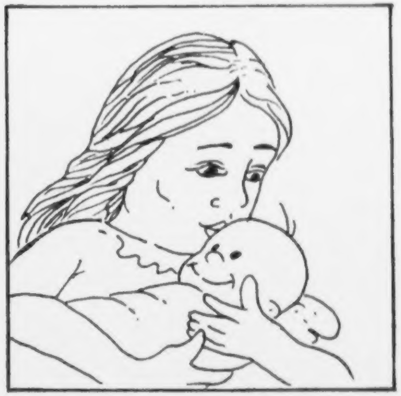
Andy: Gee, maybe if you tell all of us, we can use these rules too. Right boys and girls?

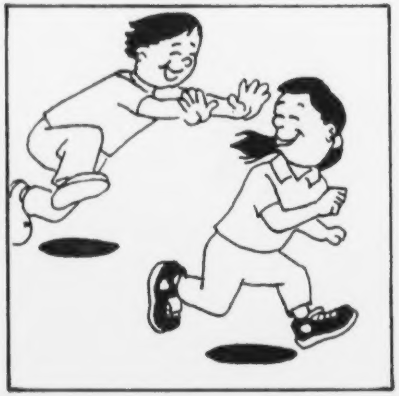
Brenda: O.K. Rule #1. Say, "NO! Stop doing that!" really loudly.
Rule #2. Tell an adult you can trust.

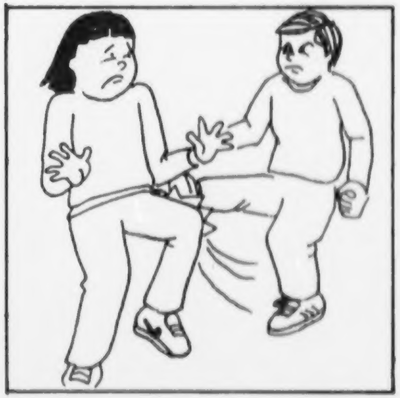
Andy: I remember the rules.
Rule #1. Say No! Stop doing that.
Rule #2. Tell an adult you can trust.
Thank you, Brenda. Boys and girls, will you remember the rules? I hope so! It's time for us to go. Bye Brenda, bye everyone.

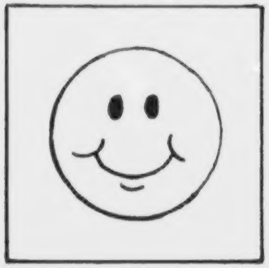
# TOUCHES

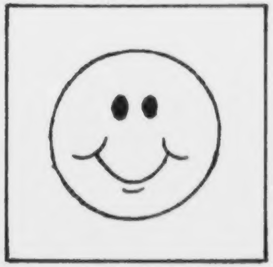


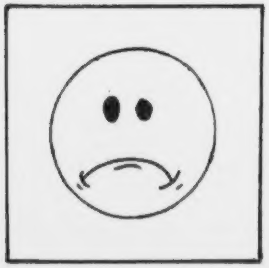


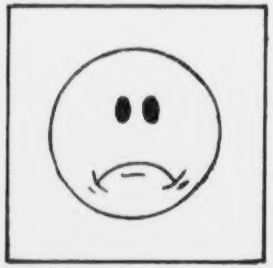












**FAMILY LIFE**

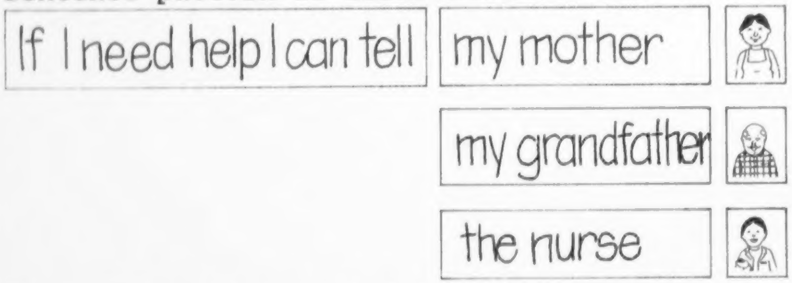
GRADE: 1 LESSON: 6 THEME: ABUSE PREVENTION

CONCEPT: PERSONAL SAFETY BEHAVIOURS MAY REQUIRE FAMILY AND COMMUNITY SUPPORT

PREPARATION:
1. Pocket chart and sentence strips
2. Prepare five finger puppet outlines for each student (Activity Sheets FL12A, 12B)
3. Materials for drawing pictures

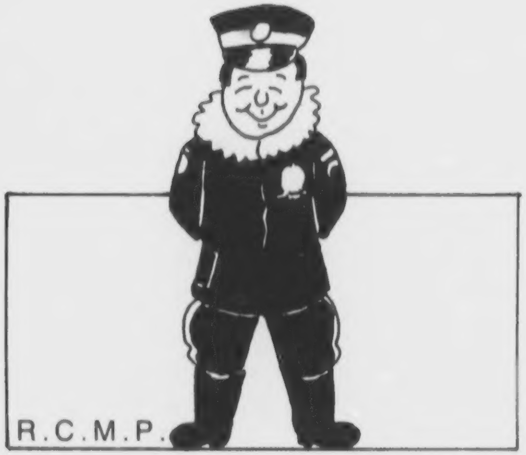
VOCABULARY: family, community, help, Block Parent

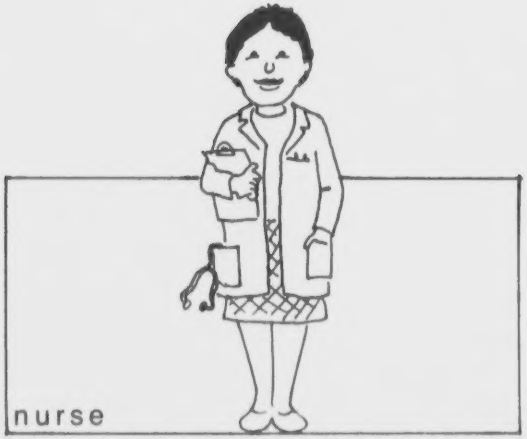
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) identify family and community support people | 1. Review the personal safety rules for dealing with "no" feelings. | Use the puppets, Andy and Brenda, from Grade 1, Lesson 5. The rules are:<br>- Say "No. Stop doing that!"<br>- Tell an adult you trust. |

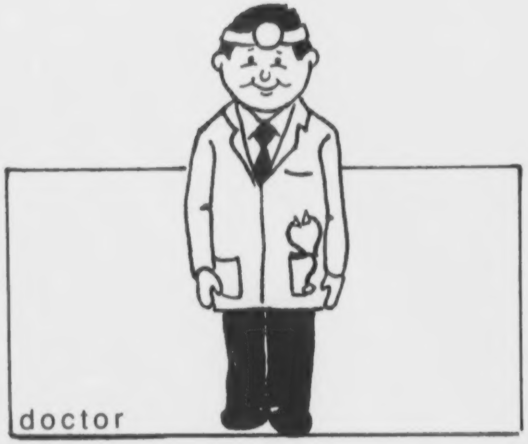
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 2. Identify adults in the community they can tell. | Brainstorm with students adults in the community whom they can trust. Record their responses using a pocket chart and the sentence pattern as illustrated.<br><br> If I need help I can tell<br>my mother<br>my grandfather<br>the nurse<br>Be sure the list includes:<br>- parents, grandparents, other relatives<br>- close adult friends, elders<br>- Block Parents, neighbours<br>- teacher, nurse, doctor, R.C.M.P., clergy |
| | 3. Play the "Who Can you Tell?" game. | Refer to Activity Sheet FL12.<br>Give each student five finger puppet outlines (three specific people such as nurse, R.C.M.P., etc. and two blanks). Have students draw someone they can tell on the blanks, e.g., mother. Students sit in a circle. First student says "If I need help, I can tell ...."; s/he holds up a finger puppet and says whom s/he can tell. Other students who have the same puppet hold it up too. Then the next student has a turn, etc. |

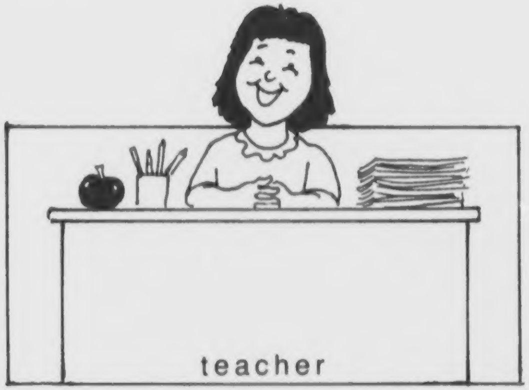
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 4. Draw a picture of a family or community support person. | Have students choose one adult they can trust to draw. Some students may be able to copy or write the sentence pattern on the bottom:<br>If I need help I can tell my ____________.<br>Make the drawings into a "Who Can You Tell?" book. |

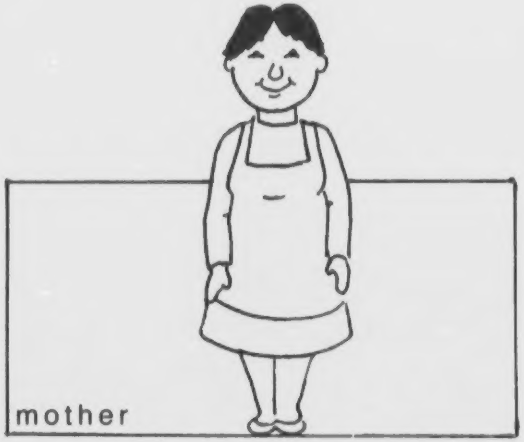
FL12A

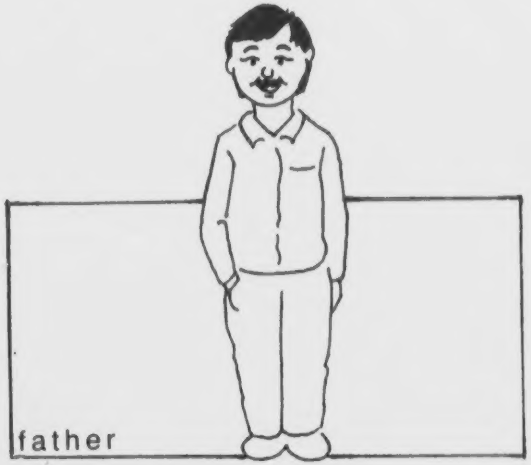




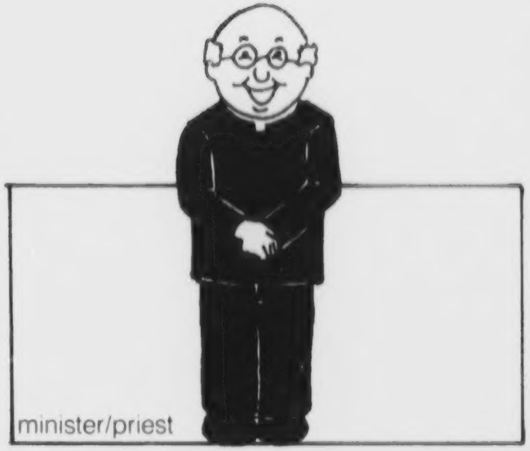


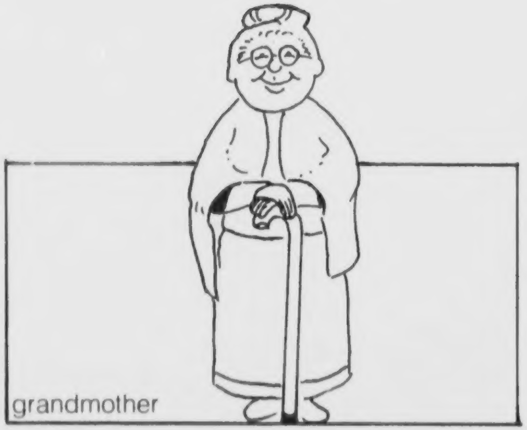


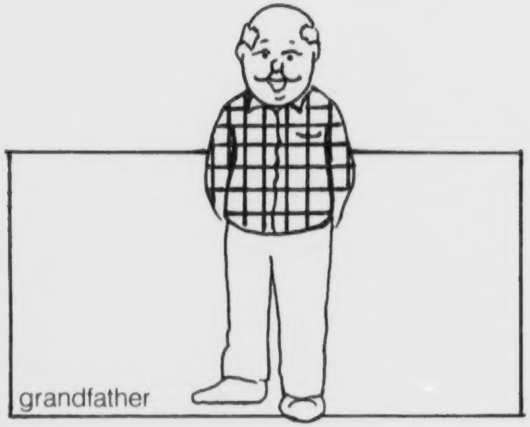


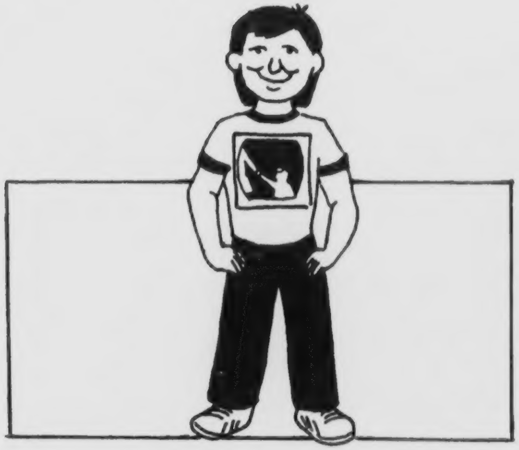


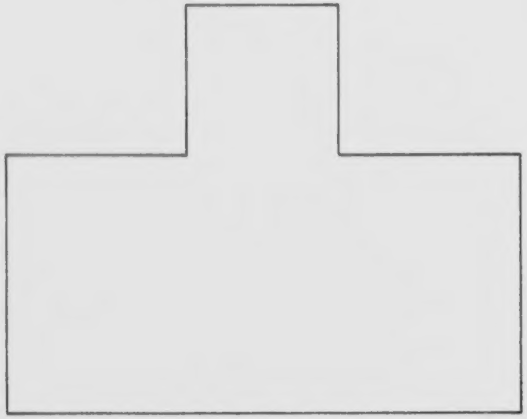
FL12B


minister/priest


grandmother


grandfather





# GRADE 1

# TEACHER BACKGROUND INFORMATION

## FAMILY LIFE

## FAMILIES

Families play an important role in society by providing a loving, caring environment for their members.

In native societies, family ties are still very strong. Many people within a community are related to each other. Through the family, the traditions, values and language of the culture are transmitted from one generation to the next.

Because the family is such an important part of native life, it is extremely important for teachers to ensure the cultural relevance of these lessons for the children in their class. Each lesson should be adapted or altered as necessary to fit the local situation. In schools with native students, it is strongly recommended, that native teachers, a classroom assistant, a parent or elders either teach the lessons or discuss with the students the concepts related to families in that context.

A nuclear family can be considered "a committed group of people that lives together in a home and provides love, care, nurture and support for its members." This definition will not fit the concept of a family for some groups, where the extended family is the common family unit. Teachers should select with local elders a suitable definition of a family in their local situation.

In present day society, family structures vary greatly in size and composition:

i) the nuclear family usually consists of mother, father and children

ii) the one parent family results from separation, divorce, death or choice

iii) the extended family includes most relatives, but particularly grandparents, aunts, uncles, cousins

iv) the adopted family accepts a person from another family into their family

v) the foster family looks after a child, on a temporary basis

vi) the blended family occurs when members of different families come together, e.g., through remarriage

## ABUSE PREVENTION

The lessons in this grade do not deal specifically with sexual abuse, but they do serve as an introduction to the topic.

Students evaluate different touches by the positive or negative feelings they produce. Students may experience touches which make them feel comfortable, some which make them feel uncomfortable and some which make them confused. Confused feelings are generally created when they experience a touch which usually makes them feel comfortable, but in this particular situation or from this particular person, it produces uncomfortable feelings. For younger students, these are referred to as "yes" or "no" feelings.

Students are encouraged to develop their own family and community support systems so that, should they be at risk, they know who to approach and how to contact them.

Teachers must approach the topic of Abuse Prevention with sensitivity. They may have an abused child in the class. When teachers teach about abuse, they may be told about an abuse. To ensure they know the correct procedures to follow if they suspect child abuse, they should become familiar with the N.W.T. Department of Education 'Procedures for Reporting Suspected Child Abuse' (available in all schools).

Staff should also become familiarized with local support people in the community. Schools should advise agencies involved in the investigation and treatment of child abuse that they will be using materials on abuse prevention in the schools.

# DEPARTMENT OF EDUCATION GUIDELINES FOR EDUCATION PERSONNEL REPORTING SUSPECTED CHILD ABUSE

Any person employed by the Department of Education, a Board of Education, or a Divisional Board of Education in the Northwest Territories who suspects child abuse shall:

1. Immediately report orally the details of the suspected abuse to the local or regional representative of the Department of Social Services.
2. Inform the principal of the school of the report.
3. Follow-up the oral report to the local or regional representative of the Department of Social Services, as soon as possible, with a written report to the Superintendent of Child Welfare in Yellowknife.
4. Upon receiving a report from an employee, the principal shall immediately inform the Regional Superintendent of Education that a report of suspected child abuse has been made.
5. Staff shall *not* contact the child's family or the suspected perpetrator or anyone else to inform or further investigate the circumstances of the suspected abuse. This is the responsibility of the Department of Social Services and the R.C.M.P.
6. Any information, oral or written, about child abuse cases is confidential. All written records or reports must be treated confidentially and should not be placed in the child's record or cumulative file. Information necessary in the conduct of the investigation or subsequent treatment of the child or the offender must be shared with the authorized agencies.
7. The above procedures will also be followed by adult educators with regard to children who are or, in the absence of evidence to the contrary, appear to be under the age of 18 years of age. However, adult educators are not required to inform the principal of the school.

Supt. of Child Welfare
Department of Social Services
Box 1320
Yellowknife, X1A 2L9
(403-873-7709)

# GRADE ONE

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# SAFETY AND FIRST AID

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**SAFETY AND FIRST AID**

**GRADE 1** | **LESSON: 1** | **THEME: PERSONAL SAFETY**

**CONCEPT:** PERSONAL SAFETY INVOLVES FOLLOWING SAFETY RULES AND KNOWING PERSONAL IDENTITY FACTS AND COMMUNITY HELPERS

**PREPARATION:**

1. Prepare a class set of Safe, Unsafe (Activity Sheet SFA 6)
2. The Safety Song (Activity Sheet SFA 7)
3. Prepare a class set of Safety Facts (Activity Sheet SFA 8)
4. Props or pictures of community safety helpers

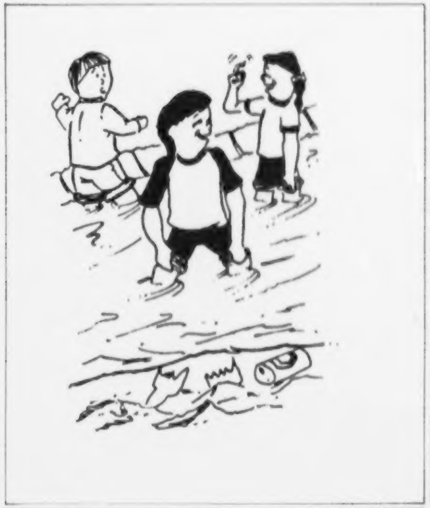
**VOCABULARY:**

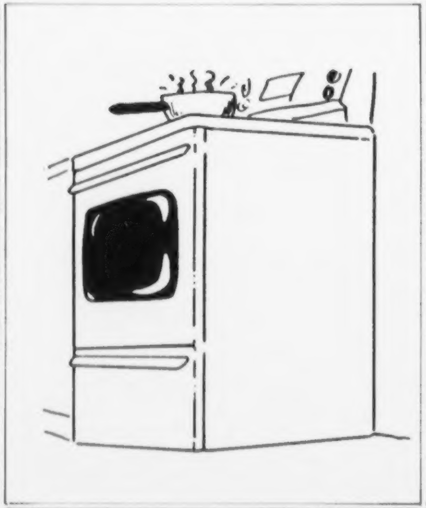
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page — |
| i) state personal safety rules | 1. Review personal safety rules. | This is a review of Kindergarten, Lesson 1. |
| | 2. Complete Safe Or Unsafe? worksheet. | Refer to Activity Sheet SFA 6.<br>Have students identify unsafe situations in each picture and put an [illegible] on the unsafe things. Colour the safe pictures. |
| | 3. Sing the Safety Song. | Refer to Activity Sheet SFA 7.<br>Add extra verses using personal safety rules from Student Activity 1 |

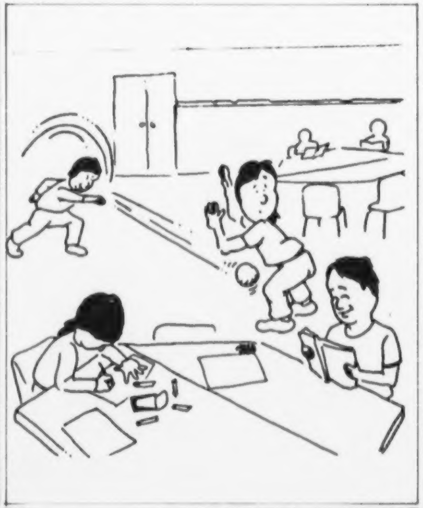
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) state personal identity facts | 4. Practise stating full name, where they live and telephone number. | Use a chain drill to practise stating personal information.<br>Teacher: What is your name?<br>First student: My name is ________________.<br>First student to second student: What is your name?<br>Second student: My name is ________________.<br>Second student to third student, etc.<br>Repeat using the sentence patterns:<br>Where do you live?<br>I live ________________.<br>What is your telephone number?<br>My telephone number is ________________.<br>or I don't have a telephone. |
|  | 5. Write personal safety information. | Refer to Activity Sheet SFA 8.<br>Complete the section on their name, where they live and phone number. Have students take the worksheet home and ask parents to fill in a daytime phone number where they can be reached. Students could bring the worksheet back in for teachers to make a copy. Have them display one copy in the class and one at home. |

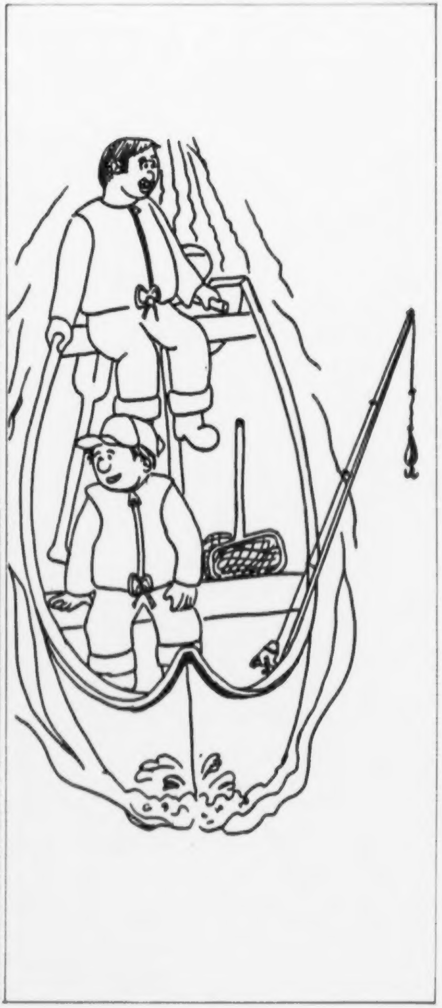
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| iii) identify community safety helpers | 6. Name community safety helpers to contact if they need help. | Use props or pictures to stimulate student responses and develop a list of community safety helpers.<br>These could include:<br>- parents or other relatives and neighbours they trust<br>- fire fighters<br>- nurse<br>- doctor<br>- ambulance driver<br>- police<br>- minister or priest<br>- any trusted adult<br>- block parents<br>Most students of this age would turn to their parent(s)/guardian in an emergency but it is important for them to know who else to contact if these people are not available. |
| | 7. Identify community safety helpers to contact in given situations. | Divide students into small groups and have them identify a safety helper to contact in various situations.<br>e.g., You cut your hand really badly.<br>You see smoke coming from a house. |

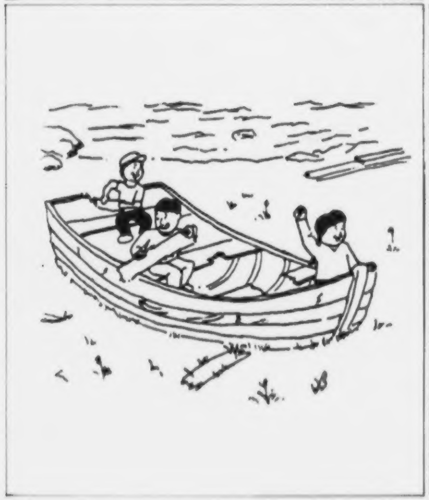
# SAFE OR UNSAFE?

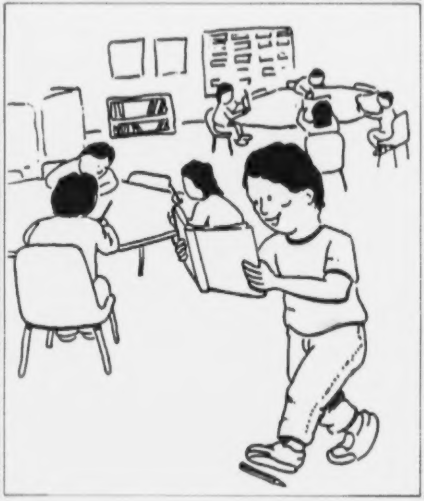


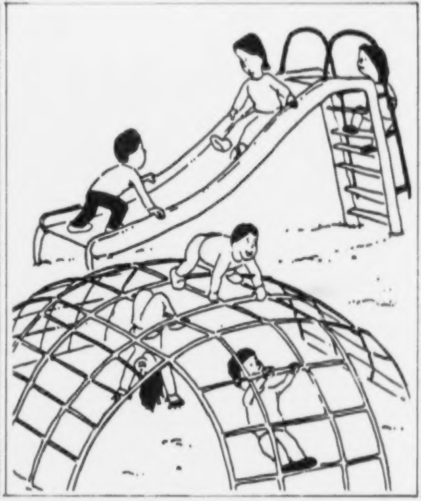












# THE SAFETY SONG

SFA 7

(Tune: The wheels on the bus go round and round)

Children like to run and play, run and play, run and play
Children like to run and play
All day long.

It's unsafe to push and shove, push and shove, push and shove
It's unsafe to push and shove
All day long.

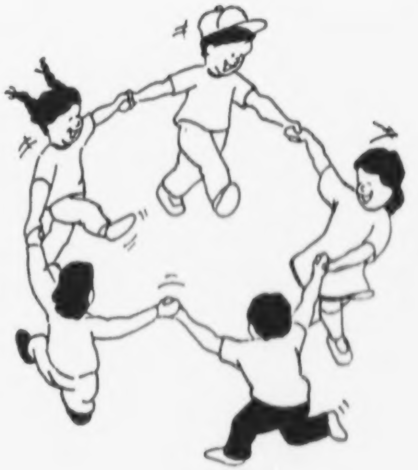
It's unsafe to play with matches, play with matches, play with matches
It's unsafe to play with matches
All day long.

It's unsafe to run with sharp things, run with sharp things, run with sharp things
It's unsafe to run with sharp things
All day long.

Play with toys, but not with guns, not with guns, not with guns,
Play with toys, but not with guns
All day long.

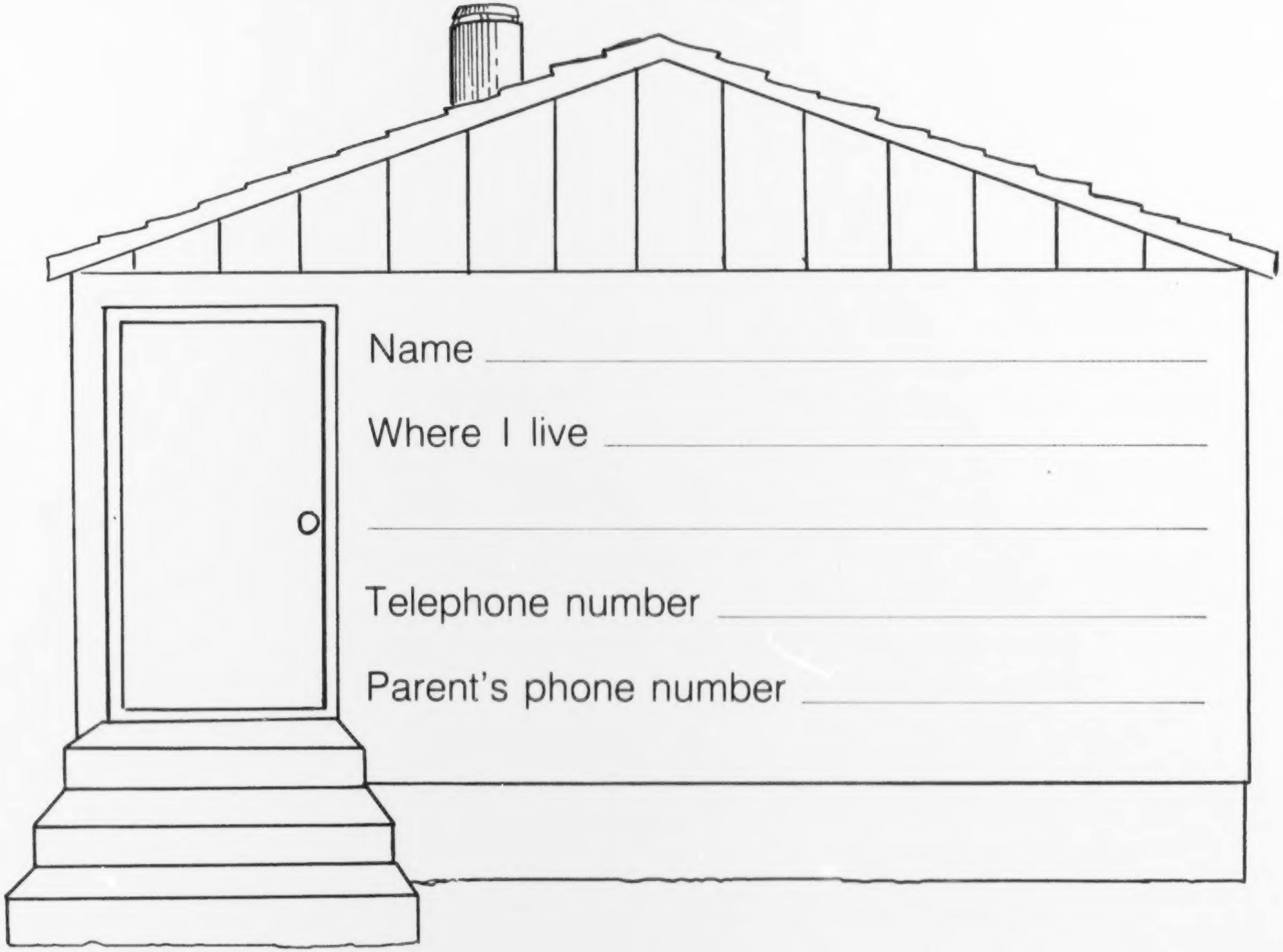
We always pick up our toys, pick up our toys, pick up our toys
We always pick up our toys
All day long.

We play safely and have more fun, have more fun, have more fun
We play safely and have more fun
All day long.



# SAFETY FACTS

**SFA 8**



Name ______________________________

Where I live __________________________

______________________________________

Telephone number ____________________

Parent's phone number ________________

**SAFETY AND FIRST AID**

**GRADE 1** **LESSON: 2** **THEME: PERSONAL SAFETY**

**CONCEPT:** PERSONAL SAFETY INVOLVES KNOWING EMERGENCY TELEPHONE NUMBERS AND HOW TO PLACE AN EMERGENCY TELEPHONE CALL

**PREPARATION:**

1. Telephone books and highlighters
2. Emergency symbols (Activity Sheets SFA 9A to 9I)
3. Prepare a class set of Emergency Numbers Stickers (Activity Sheet SFA 10)
4. Mailing labels, packing tape
5. Model/toy telephones
6. Volunteers from a senior class to assist with Student Activity 7

**VOCABULARY:** emergency, symbol, poison

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page — |
| i) identify emergency symbols and telephone numbers in the telephone book | 1. State the meaning of various emergency symbols. | Refer to Activity Sheets SFA 9A, 9B, 9C, 9D (Western Arctic) or SFA 9E, 9F, 9G, 9H, 9I (Eastern Arctic).<br>Show each emergency symbol, and have students identify what it means. |
| | 2. Define emergency. | Tell students that the pictures they have just seen are pictures of emergencies symbols. Something is an emergency when a person could get hurt or die unless people do something right away.<br>Ask students to explain why a fire is an emergency, or why a baby swallowing poison is an emergency. |

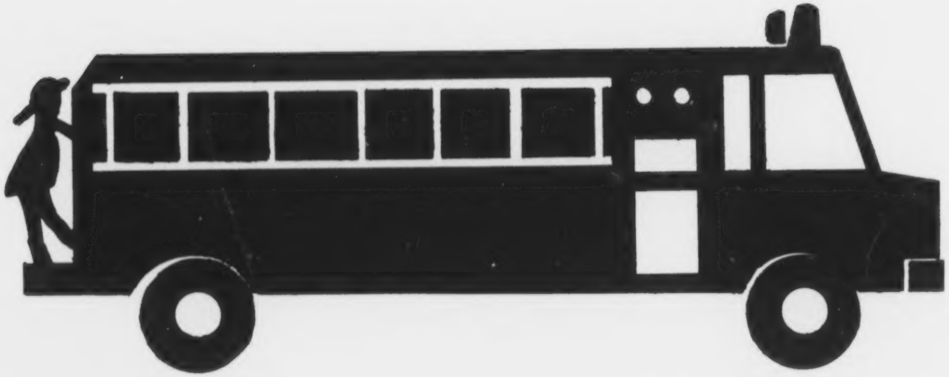
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Ask them to explain what needs to be done right away in order to stop someone from getting hurt or dying. Ask them to tell about emergencies that they know of. |
| | 3. Locate emergency symbols and telephone numbers in the regional telephone book. | Have students find the emergency symbols in the telephone book.<br>**Western Arctic**<br>Develop a way for students to identify the numbers for their community, e.g., the one with the shortest name, the second one from the top, etc. Use a highlighter to accent the name of your community. The class could make a project of highlighting the community name in phone books in the school and at home.<br>**Eastern Arctic**<br>Spaces have been left in which to write the appropriate numbers. The class could make a project of ensuring that correct numbers are written in these spaces in all available telephone books in the school and at home. |
| | 4. Play What If game. | Refer to Activity Sheets SFA 9A, 9B, 9C, 9D or SFA 9E, 9F, 9G, 9H, 9I.<br>Display these on a bulletin board with the corresponding telephone number beside each. Give students various "what if" situations and have students state the number to call.<br>e.g., Teacher: What if a shed were burning?<br>Student: I would call the fire number, 123-4567. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 5. Make a sticker for the telephone, listing emergency telephone numbers. | Refer to Activity Sheet SFA 10.<br>Give each student the appropriate emergency symbols (east or west) and a self adhesive mailing label 3½ cm X 10 cm. Have students cut out the symbols, glue them onto the mailing label, and print the appropriate number beside or under each symbol.<br>"Laminate" the mailing labels with packing tape and have students take them home to put on their telephones, or other telephones in the community. |
| ii) demonstrate how to place a simulated phone call to a community helper | 6. Observe a demonstration on how to place an emergency telephone call. | Using model/toy telephones demonstrate placing an emergency telephone call. Steps are:<br>- dial correct number<br>- state their name and location<br>- state the problem<br>- wait to hear full reply from the person called |
| | 7. Simulate placing an emergency telephone call to a community safety helper. | Have students work in small groups with the assistance of volunteer students from senior classes. Using model telephones and given situations have students simulate placing an emergency telephone call.<br>e.g., Your sister has just cut herself badly with a knife. |

SFA 9A

# EMERGENCY SYMBOLS

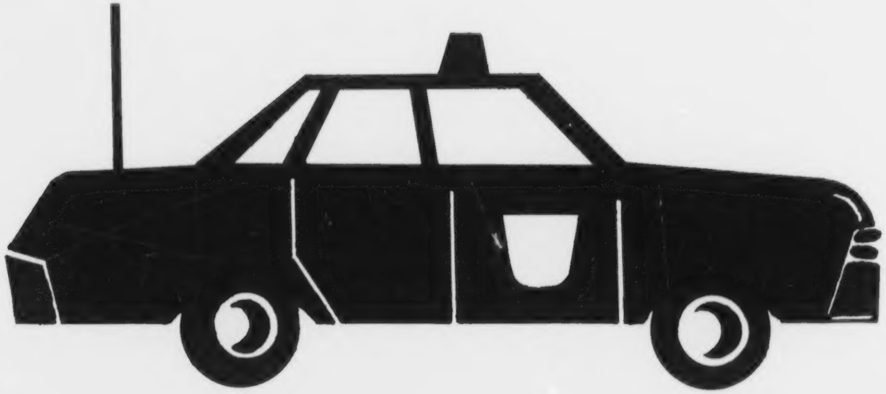
(Western Arctic 1 of 4)



# EMERGENCY SYMBOLS

(Western Arctic 2 of 4)

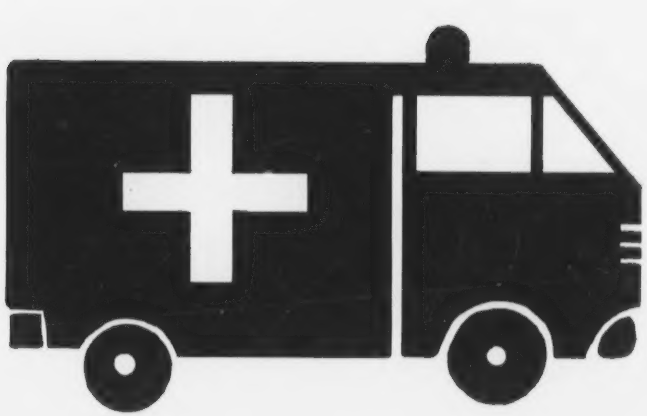
**SFA 9B**



# EMERGENCY SYMBOLS

(Western Arctic 3 of 4)

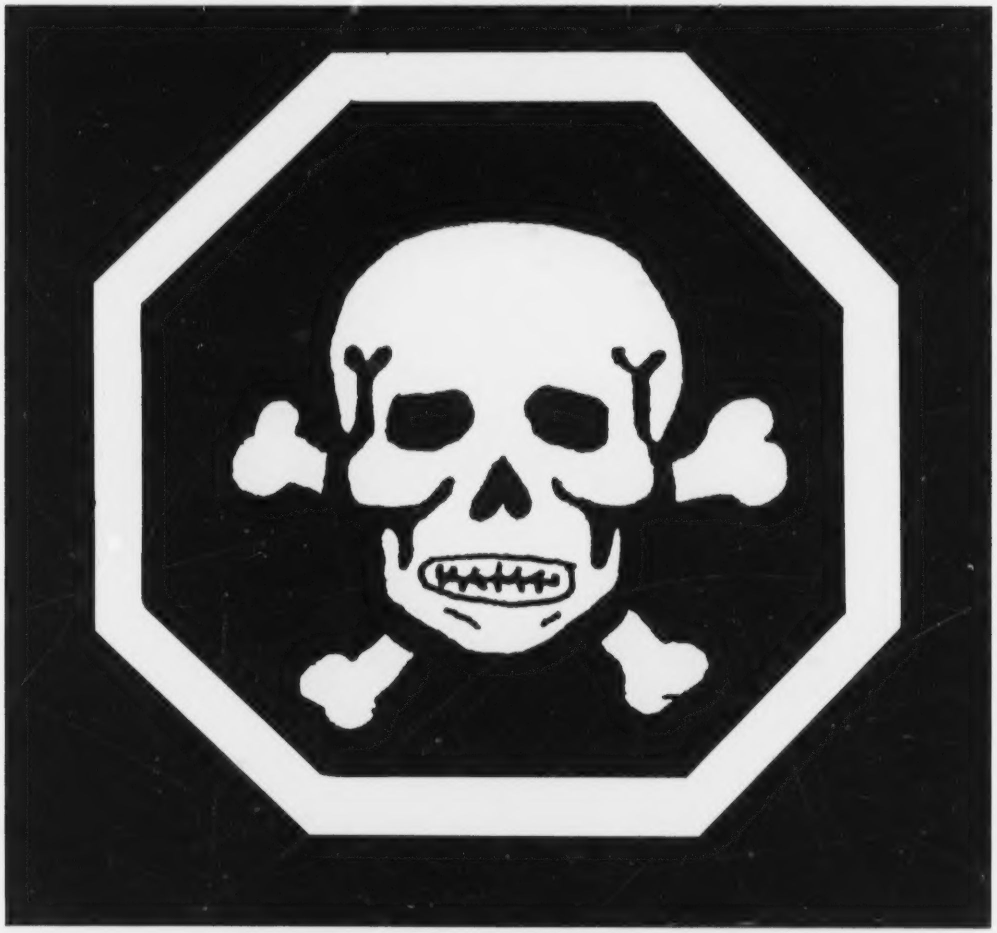
SFA 9C



# EMERGENCY SYMBOLS

(Western Arctic 4 of 4)

**SFA 9D**



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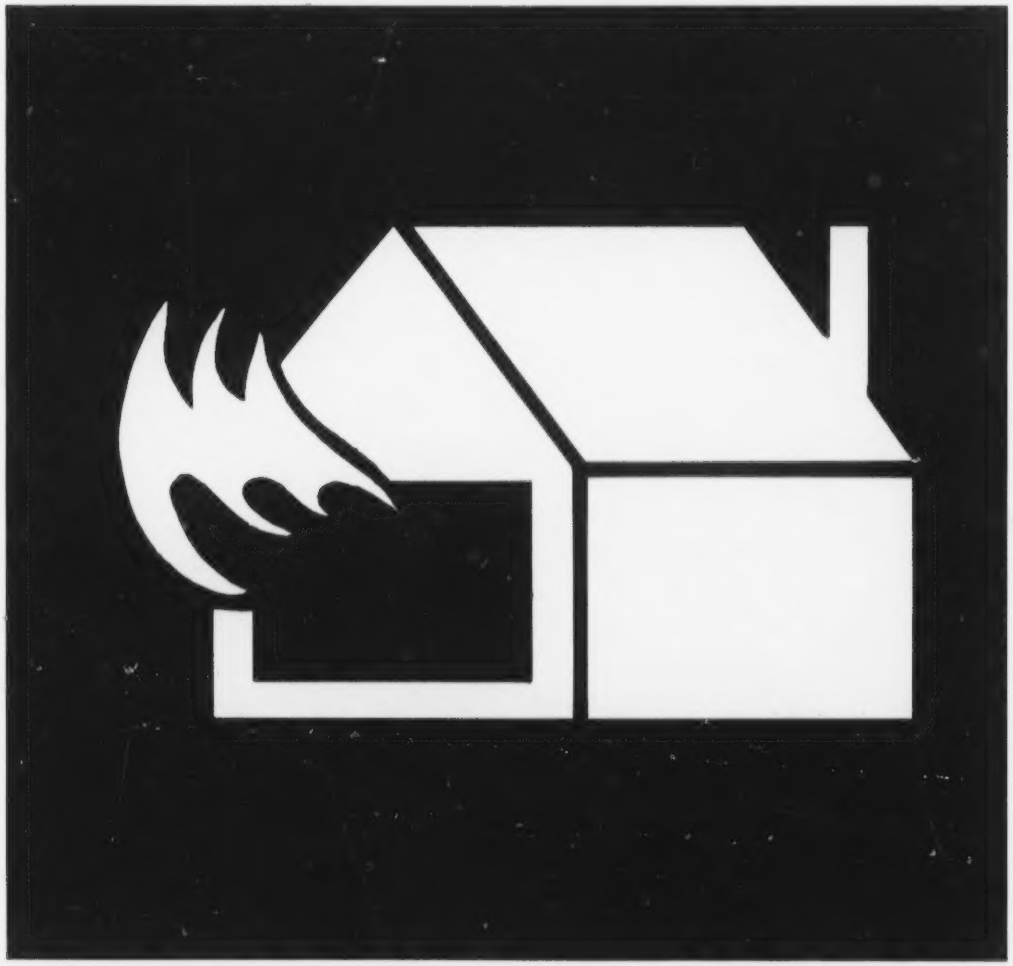
# EMERGENCY SYMBOLS

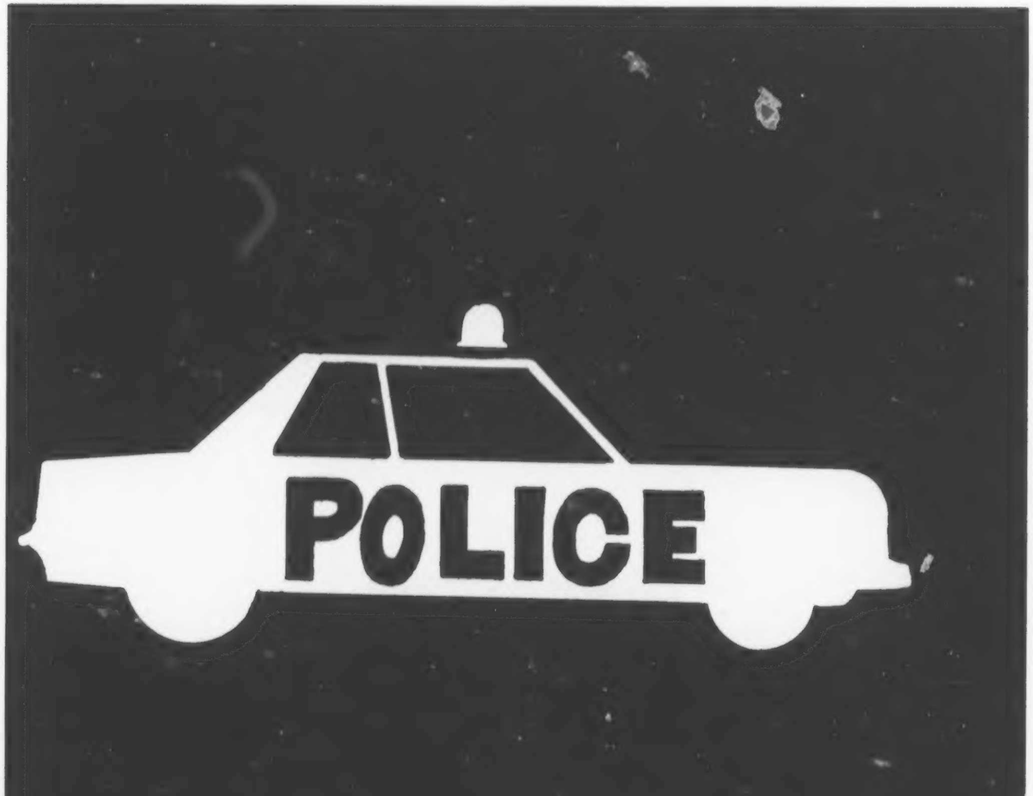
(Eastern Arctic 1 of 5)



# EMERGENCY SYMBOLS

SFA 9F

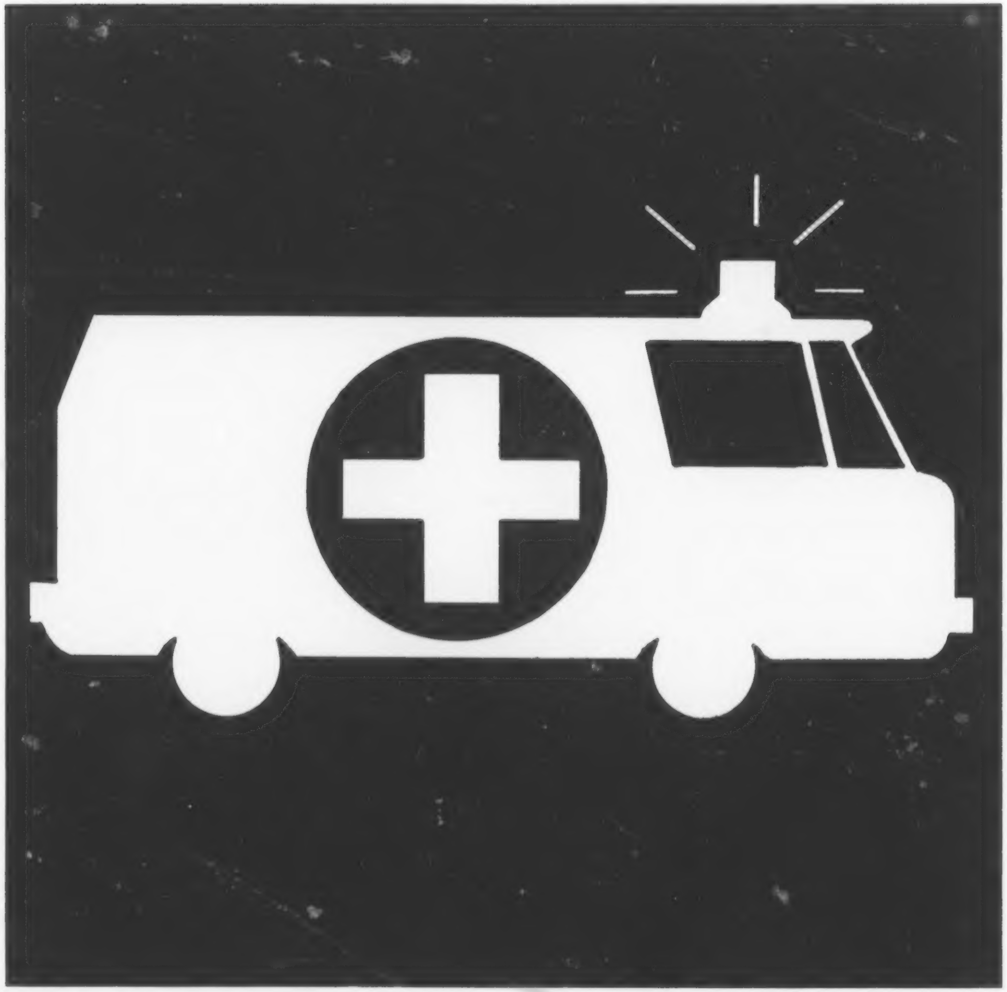
(Eastern Arctic 2 of 5)



SFA 9G

# EMERGENCY SYMBOLS

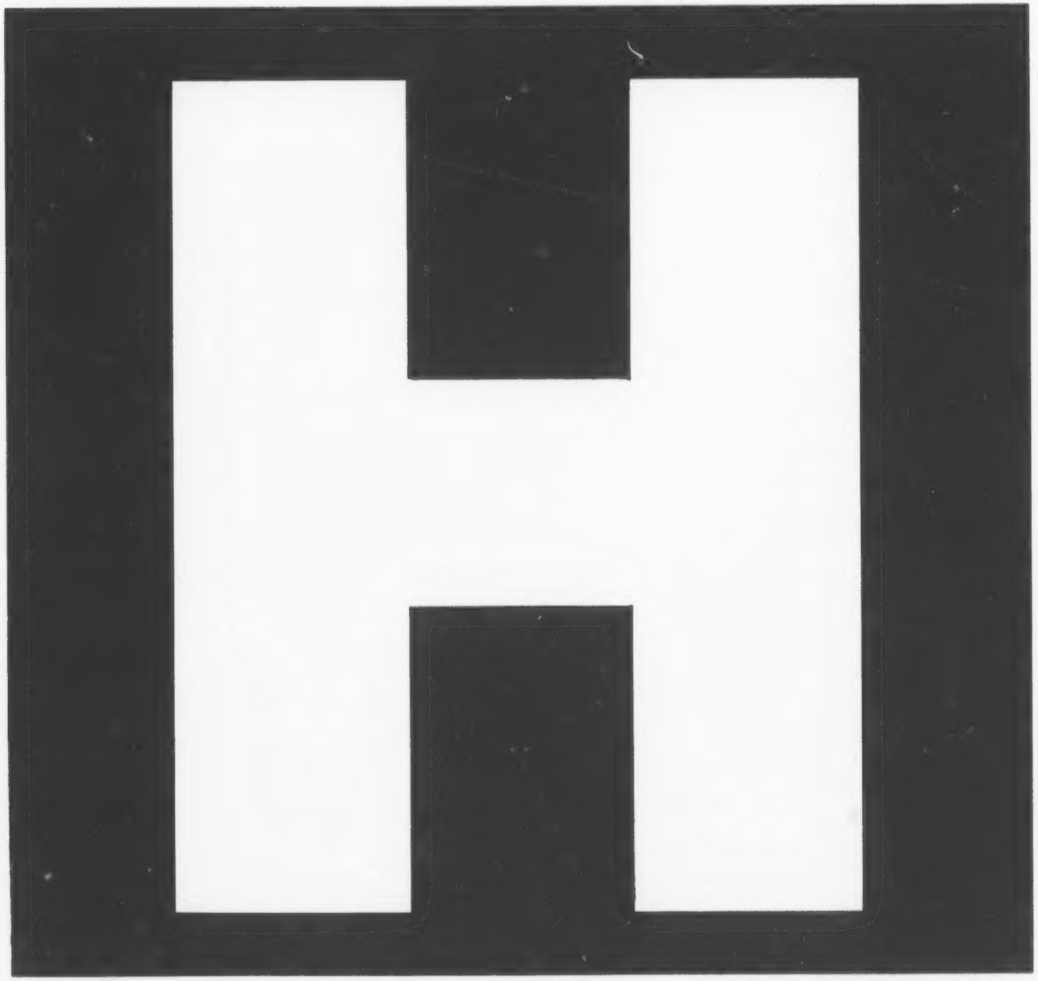
(Eastern Arctic 3 of 5)



**SFA 9H**

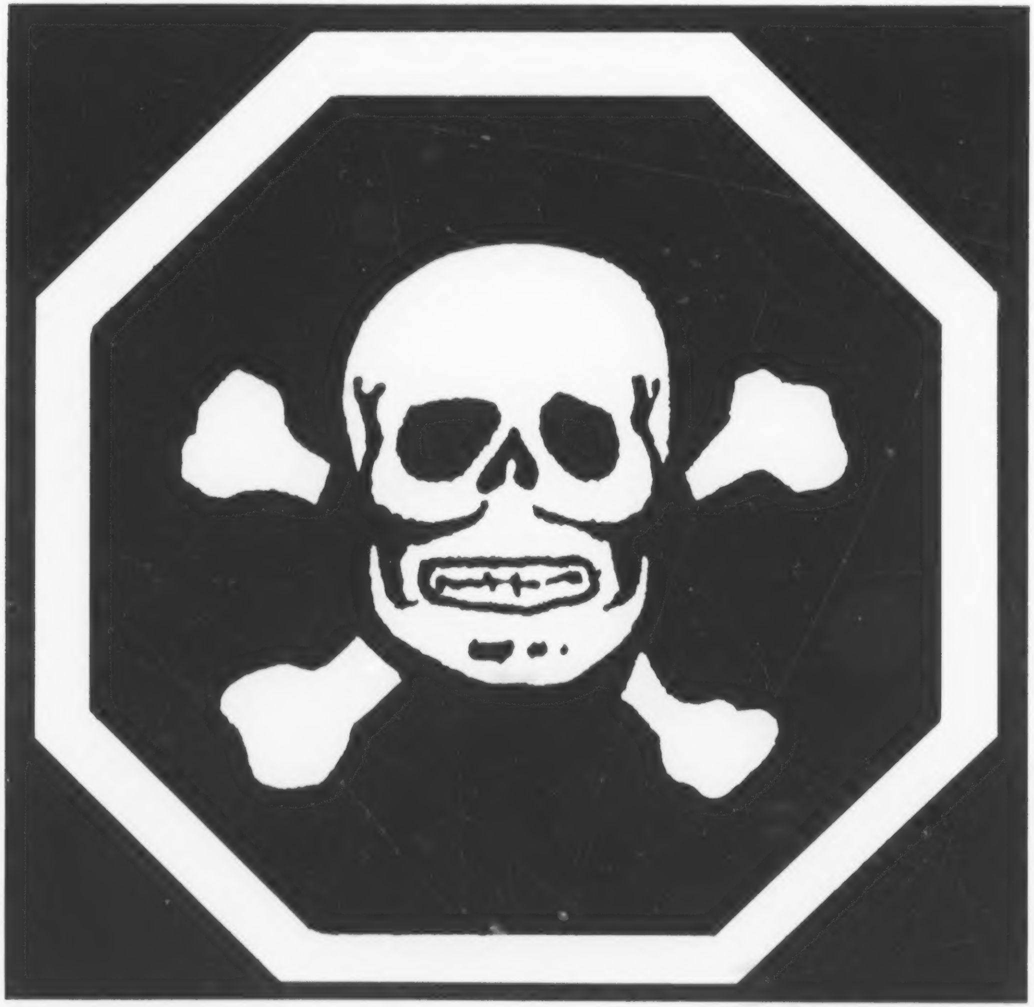
# EMERGENCY SYMBOLS

(Eastern Arctic 4 of 5)



# EMERGENCY SYMBOLS

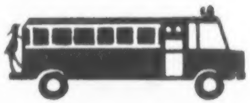
(Eastern Arctic 5 of 5)

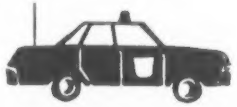


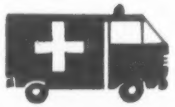
# EMERGENCY NUMBERS STICKERS

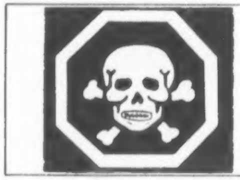
SFA 10

## Western Arctic

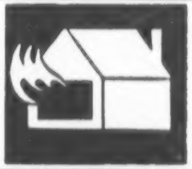


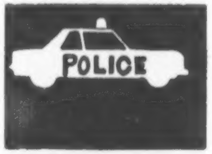


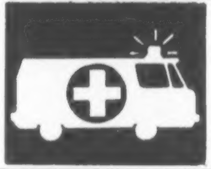


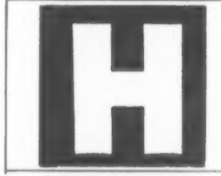


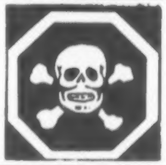
## Eastern Arctic











## SAFETY AND FIRST AID

GRADE 1 LESSON: 3 THEME: ACCIDENT PREVENTION

**CONCEPT:** INJURIES FROM BURNS, SCALDS AND FALLS CAN BE PREVENTED BY FOLLOWING SAFETY RULES

**PREPARATION:**

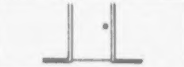
1. Cards or strips for pocket chart
2. Prepare a class set of Burn, Scald or Fall (Activity Sheet SFA 11)
3. Materials for accordian books
4. Real or toy stove

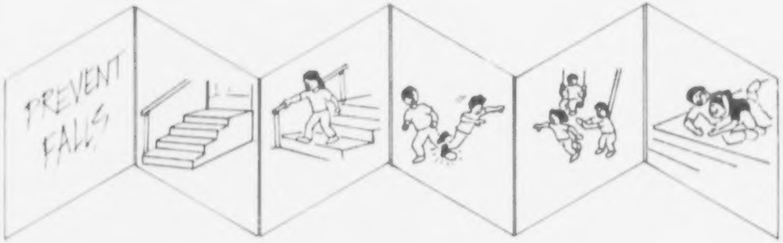
**VOCABULARY:** burn, scald, prevent, injury

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page SFA 45-46 |
| i) name common injuries to children | 1. Describe injuries that they have had. | Ask students if they have ever been hurt. Allow them to describe their injuries and how they happened. Since this lesson focuses on burns, scalds and falls elicit as much detail as you can about any of these injuries as reported by students. What happened? How? Why? etc. |
| | 2. Define burn and scald. | Burns are caused by dry heat such as fire, electricity, or the sun. Scalds are caused by wet heat such as boiling water, hot oil or steam. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| ii) identify safety rules to prevent burns and scalds | 3. Name safety rules to prevent burns and scalds. | Conduct this activity in a room with a real or a toy stove - i.e. kindergarten room, staff room, home ec. room.<br>Give pairs or small groups of students situations to act out while other students have to guess the safety rule being acted, or name a safety rule that the actors should be following.<br>e.g., Situation: Two students playing with matches.<br>Rules: Always keep matches away from children.<br>Never play with matches.<br>Other rules include:<br>Always play away from the stove.<br>Always turn pot handles towards the back of the stove.<br>Always keep hot liquids away from children.<br>Always give matches to an adult.<br>Never climb on or play near a stove.<br>Always keep lighted candles, oil lamps and cigarettes away from small children.<br>Never poke anything into an electrical outlet or socket.<br>Never touch exposed wires. |

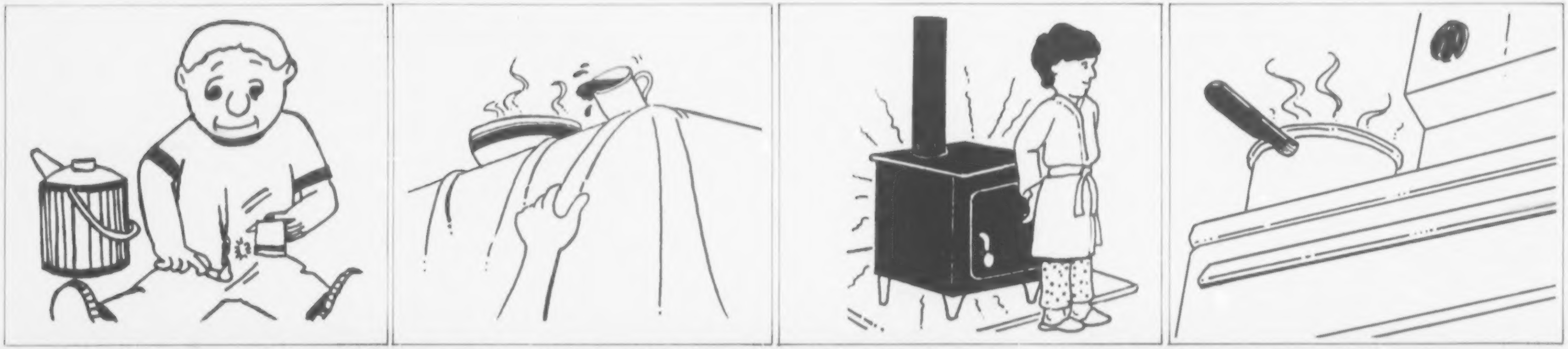
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| iii) identify safety rules to prevent falls | 4. Name safety rules to prevent falls. | Record student responses using a pocket chart as illustrated. Rules include: |

| | | | |
|---|---|---|---|
| ✓ | Always | | tie shoelaces |
| ✓ | Always | | keep stairs tidy |
| ✓ | Always |  | keep doorways tidy |
| ✓ | Always | | hold railing |
| ✓ | Always | | use a safety gate |
| ✕ | Never | | push |
| ✕ | Never | | trip others |
| ✕ | Never | | play near stairs |
| ✕ | Never | | climb on furniture |

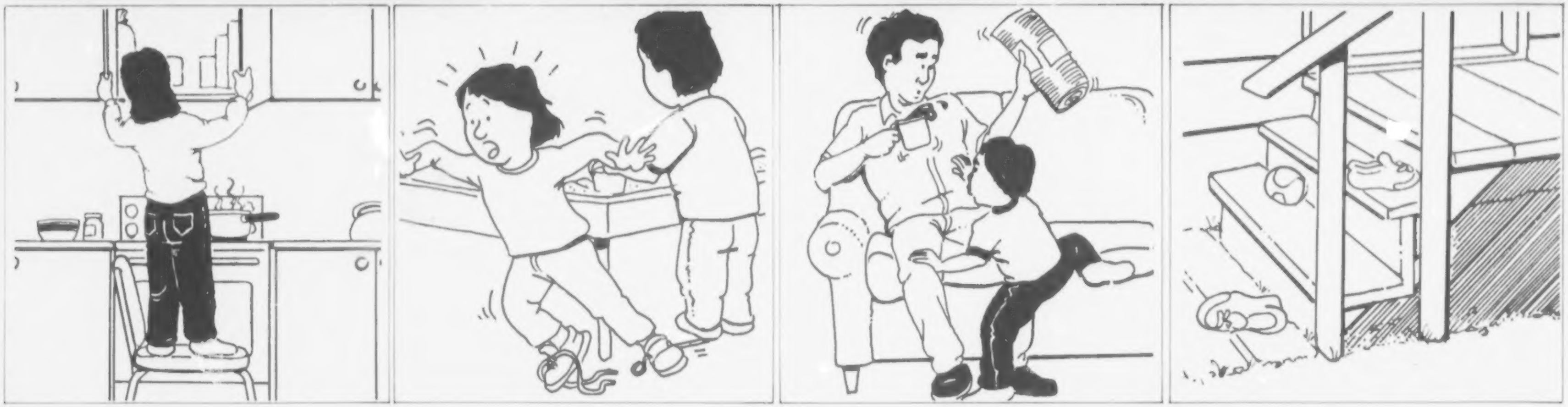
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 5. Play Thumbs Up, Thumbs Down. | Make oral statements about safety rules identified in Student Activities 2 and 3. If a statement is true students signal "thumbs up" - e.g., Never push on the playground. If a statement is false, they signal "thumbs down" - e.g., Always turn pot handles towards the front of the stove. |
| | 6. Complete Burn, Scald or Fall worksheet. | Refer to Activity Sheet SFA 11.<br>Have students cut out all pictures and words and sort them into three piles - burn, scald, fall.<br>Arrange each pile on a separate 8½ x 11 sheet and paste. Write the appropriate title (i.e. BURN, SCALD, FALL) on each sheet. |
| | 7. Make safety books illustrating prevention of burns and scalds, and falls. | Make two accordian books, one on burns and scalds and one on falls. Each student can illustrate a safety rule as learned in this lesson and individual safety rules can be compiled into books.<br> |

# BURN, SCALD OR FALL

SFA 11



**BURN** **FALL** **SCALD**



## SAFETY AND FIRST AID

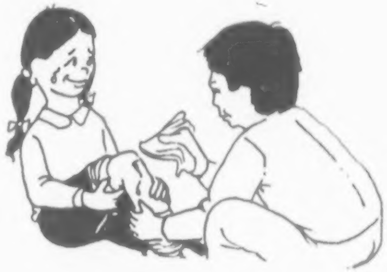
GRADE 1 LESSON: 4 THEME: FIRST AID

**CONCEPT:** MINOR INJURIES CAN BE CORRECTLY TREATED BY CHILDREN

**PREPARATION:**
1. Red pen
2. Soap and water
3. Enough bandaids for each student

**VOCABULARY:** cut, scrape, bandaid, first aid

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page SFA 50<br>Although the term bandaid refers to a brand name, it is used in this lesson since students are more likely to be familiar with it, than with the generic term plaster. |
| 1) demonstrate first aid for minor cuts and scrapes | 1. Discuss examples of minor cuts and scrapes.<br>2. Define "first aid". | All students will likely have had minor (simple) cuts and scrapes. Allow students to talk about times when they have had simple cuts or scrapes.<br>Ask students to tell what happened when they had a cut or scrape. If parents or someone else have cleaned the cut or scrape and put on a bandaid this is called first aid.<br>First aid is treatment (taking care) of someone who is hurt. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 3. Observe a demonstration on how to clean and dress a minor cut and scrape.<br> | Simulate a scrape by drawing a red "blotch" on the knee of a student volunteer. Then show the following first aid steps.<br>1. Thoroughly wash your own hands with hot, soapy water. Dry.<br>2. Wash cut under running water.<br>3. Allow skin to dry.<br>4. Cover with bandaid.<br>5. Thoroughly rewash your own hands, with hot, soapy water. Dry.<br>There is no need to use a disinfectant; cleaning with water is sufficient. If the cut is bleeding, apply pressure with a clean cloth or bandage over the cut until the bleeding stops. Get help from a responsible adult. If the cut is large or dirty get help from a responsible adult. |
|  | 4. Demonstrate cleaning and dressing a minor cut and a scrape. | Have the students work in pairs to practise cleaning and dressing a simulated cut. |

# GRADE 1
# TEACHER BACKGROUND INFORMATION

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## SAFETY AND FIRST AID

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## GENERAL SAFETY

Injuries, accidents and violence account for approximately 30% of all deaths in the N.W.T. A World Health Organization Report suggests that Canada is the worst country in the industrialized world for accidents among children.

Children are extremely curious and extremely active. They are, therefore, at high risk of accidental injury. However, knowledge of potentially dangerous situations and behaviours, the development of skills such as decision-making and the encouragement of attitudes such as being responsible for one's own actions can contribute to a reduction in, or the prevention of, accidents and injuries.

At the same time, school staff with a basic knowledge of First Aid can respond immediately to an emergency situation, ensuring prompt and appropriate treatment is provided.

St. John Ambulance is a national organization which will provide basic First Aid Training Courses in communities. For more information about St. John Ambulance in the Northwest Territories, contact:

St. John Ambulance
51st Avenue & 51st Street
YELLOWKNIFE
403-873-5658

## FIRE SAFETY

**Safety Practices to Prevent Fires**
Fire prevention involves positive safety practices:

- keep matches out of reach of children;
- children should never play with matches;
- never use gasoline or other flammable liquids to start fires.
- fire extinguishers should be easily available and kept in good working order;
- never leave electrical appliances on and unattended;
- turn pot handles away from the front of the stove;
- keep flammable material (clothes, paper, blankets etc.) away from fires and heaters;
- never smoke in bed.

**Fire Drill Procedures**
Schools should practise fire drills regularly. Being able to evacuate a building quickly and in an orderly fashion may make the difference between life and death.

When the fire alarm sounds:

- walk to the door in an orderly fashion;
- line up in single file by the door;
- wait for the teacher to say when to leave;
- the teacher should close the door behind him/her;
- walk quickly and quietly behind the leader to the fire exit;
- assemble at the pre-selected point - this should include a nearby building in winter time;
- check that everyone is there;
- stay outside; do not go back into the building, until a responsible adult has determined it is safe to do so.

In the event of evacuating a building in extremely cold temperatures, the Yellowknife Fire Department recommends:

- students should always wear shoes in the classroom - there should be no sock feet;
- grabbing coats and boots on the way out - assuming that they are located in or immediately outside the classroom;
- leaving the building without coats or boots, if they are not close by - e.g. if students are in the gym.

The Fire Department also recommends that schools which are some distance from other buildings which could provide temporary shelter should:

- keep a supply of blankets in the gym or shop;
- where there is a school bus, use it to shelter students.

### When a Building is on Fire

There are two basic rules to remember in the event of fire:

- Get out!
- Get help!

The following steps should be followed in the event of discovering a fire or being in a building which is on fire:

- yell 'Fire! Fire!' as loudly as possible;
- touch closed doors. If they are warm or hot, do not open them;
- stay away from smoke. Take another exit or crawl under the smoke;
- go to a safe meeting place outside;
- call the fire department;
- do not go back inside for any reason.

It is important for students to practise this drill. They will be more likely to reach safety, if they have rehearsed the steps to follow.

### When Clothes are on Fire

The following steps should be followed, if clothing is on fire:

- STOP: stop immediately;
- DROP: drop to the ground or floor immediately;
- ROLL: roll back and forth on the burning spot until the fire is out;
- COVER: cover your face with your hand;
- COOL: cool burn with cold water immediately.

### Making a Fire Plan

Students are encouraged to develop a plan for evacuating different rooms in the school, in the event of a fire. It is also suggested that they can help their families do the same at home. The local fire department may assist with this.

## ELECTRICAL SAFETY

Accident prevention around electricity involves the following safety practices:

- keeping all electrical appliances, cords and plugs in good repair;
- using grounded appliances;
- not overloading circuits;
- never using electrical appliances near water;
- covering electrical outlets with special plugs, if there are small children around;
- never poking objects into electrical appliances, when plugged in;
- never poking objects into electrical outlets;
- keeping electrical cords where people will not trip over them.

## BICYCLE SAFETY

People who ride bicycles or motorbikes, drive snowmobiles, trucks or cars are all road users, who have to follow the rules of the road.

Accident prevention around bikes involves the following safety practices:

- keeping your bike in good working order;
- learning and observing all road signs;
- using correct hand signals for stopping or turning;
- riding on the right hand side of the road;
- always riding in single file;
- giving way to pedestrians;
- riding on the road, not the sidewalk;
- never carrying other people on the bike, unless it is built for that e.g. a baby carrier, or a tandem;
- always keeping hands on the handlebars, unless signalling;
- using a headlight after dark.

## WATER SAFETY

### Safe Boating

Accident prevention around boats involves the following safety practices:

- always wearing a lifejacket;
- always carrying safety equipment e.g. paddle and bailer;
- taking extra clothes;
- never standing up in a boat or canoe;
- never overloading the boat;
- never boating alone;

- always checking the weather;
- making sure you tell someone where you are going and when you will be back;
- never drinking alcohol when driving a boat;
- if the boat capsizes, staying with the boat.

**Safe Swimming**

Accident prevention when swimming involves the following safety practices:

- never swimming alone;
- not fooling around in or near water;
- never swimming in unknown waters;
- children should swim, only if there is an adult around;
- never swimming while intoxicated;
- never swimming if the water is really cold;
- staying in the designated swimming area, if in a controlled situation;
- obeying all warning signs.

## ICE SAFETY

Accident prevention in winter time involves the following safety practices around ice:

- checking with an adult before playing on ice;
- keeping off ice in Spring and Fall, when it is thawing;
- being cautious around dark or unknown patches of ice;
- staying away from ice, where there may be strong currents e.g. a river;
- staying away from open water;
- carrying a long pole when on ice.

## ANIMAL SAFETY

Accident prevention around animals involves the following safety practices:

- never trying to pet or pick up a wild animal;
- never picking up a dog's bone;
- never trying to break up a dog fight, even if it is your own dog;
- never playing at the dump;
- making noises when picking berries so that animals will hear you;
- never leaving garbage around your campsite or outside your house;
- if a strange dog comes up to you, stand still; keep your hands down; let the dog sniff you; talk to it in a quiet, calm voice; walk away slowly;
- if you are bitten by an animal, go to the Community Health Centre.

## COLD WEATHER SAFETY

Accident prevention in winter involves the following safety practices:

- wearing a hat to prevent heat loss;
- wearing warm mitts or gloves to prevent frostbite;
- wearing a scarf in extremely cold temperatures;
- wearing layers of clothes;
- taking extra clothes, if going out of the community;
- wearing loose clothes - tight clothes are not warm;
- checking with an adult before playing outside;
- playing with someone else and checking each other for frostbite;

- wearing warm boots when it is extremely cold;
- keeping dry.

### Hypothermia Prevention

Many people think hypothermia affects the body only in winter time; in fact, it can occur at any time of the year. It often occurs in the north in summertime, largely because of the cold temperatures of northern waters. On land, hypothermia occurs most frequently at mild temperatures, especially when it is wet or windy.

Hypothermia can be prevented by observing the following safety practices:

- carrying extra clothes in waterproof bags;
- staying dry, if possible;
- wearing a hat to protect the head from heat loss;
- not eating snow; it lowers your body temperature;
- not drinking alcohol; it also lowers your body temperature and makes you less sensitive to cold;
- taking materials or being sure materials are available for an emergency shelter.

### First Aid

See attached sheets.

### Frostbite

Frostbite is the most common injury in cold weather.

*Signs and Symptoms*

- the skin turns white, yellowish-white or purple - purple is usually a sign of severe frostbite;
- the area feels numb;
- the area becomes cold and insensitive to touch.

*Treatment*

If someone is suffering from frostbite, the following steps should be followed:

- Go to a warm place, as soon as possible;
- Use body heat to thaw the frostbite e.g. fingers - put hands under armpits;
- Rub the affected area very gently with a warm hand;
- Do not rub the area with snow;
- Put extra clothes on the affected part;
- Once inside, give the person something warm to drink - NOT alcohol;
- Immerse the frostbitten part of the body in WARM, NOT HOT, water;
- Wrap the person in blankets;
- Contact a nurse or doctor immediately.

## Hypothermia

Hypothermia occurs when the body becomes chilled over a long period of time. It is caused by exposure to cold. It is even worse when accompanied by winds, dampness or exhaustion.

*Signs and Symptoms*

- violent fits of shivering;
- shivers will stop;
- numb feeling;
- cannot walk properly; stumbles around;
- feels drowsy;
- does not realize s/he has these symptoms;

- eventually collapses;
- leads to death.

*Treatment*

If a person is suffering from hypothermia, the following steps should be taken:

- warm the person slowly;
- if possible, take him to a dry, sheltered place;
- if possible, remove his/her wet clothes;
- give him/her something warm to drink (not alcohol);
- if possible, give the person a warm bath;
- get into a sleeping bag with the person - this provides a source of body heat;
- contact a nurse or doctor.

## FIREARM SAFETY

Firearms are a part of many people's daily lives in the Northwest Territories, and will undoubtedly continue to be. Children are exposed to them from a very early age, both through day to day living and various media. Many firearm accidents have involved young people (approximately 50% of firearm accidents involve children 15 years and younger).

Children need to learn awareness and safety related to firearms and ammunition, as well as positive and responsible behaviours around firearms. It is not intended to scare children, but rather to stress caution and personal responsibility.

Children should understand

i) that firearms are dangerous - they are not toys

ii) that mishandling a gun can cause injury or death

iii) the rules of firearm safety, and

iv) preventive behaviours around firearms.

Generally, young children should learn not to touch firearms. Under Canadian law, it is illegal for someone under 14 years of age to handle guns on their own. However, because hunting is a traditional way of life in the N.W.T., there may occasionally be situations where children need to know proper handling and storage of guns. Proper handling and storage are preventive behaviours related to firearm safety; teaching these does not assume that children should be handling guns on their own.

**Preventive Behaviours Related to Firearm Safety**

1. Young children should not touch firearms.
2. Older children may handle firearms in certain situations, but with adult supervision.
3. Always stand behind and away from the person with the firearm.
4. Know the rules of proper handling and storage of firearms and ammunition.
5. Treat every gun as if it were loaded.

**Firearm Safety Rules**

1. Treat every firearm as if it were loaded.
2. Always control the muzzle of your firearm.
3. Be sure of your target and beyond.
4. Never shoot at a flat, hard surface, or at water.
5. Never point a firearm at anything you do not want to shoot.
6. Never run, climb or jump with a loaded firearm.
7. Store firearms and ammunition separately.
8. Be sure your firearm is clear of all obstructions.
9. Unload firearms when not in use.
10. Tell an adult if you find a gun lying around.

**Proper Storage of Firearms and Ammunition**

Firearms and ammunition should be stored:

- separately.
- out of easy reach.
- in a secured, dry place.
- in cold weather hunting, it is better to leave firearms in a secure cold place, rather than allow condensation which may cause freezing and firearm failure. (relate comparison of cold eye-glasses fogging up)
- in leather or cloth cases; plastic cases will cause rusting.

Adapted from the Firearm Awareness Program, Department of Renewable Resources.

'First Aid for Teachers'

The following pages have been reprinted with permission from 'First Aid for Teachers' from the Canadian Red Cross Society.

# First Aid

First aid is the immediate assistance provided to a person in physical distress to maintain vital functions until medical attention can be obtained. Do not give medical aid which you have not been trained to deliver.

**First Aid Objectives**

1. Save a life.
2. Prevent further injury.

**First Aid Priorities**

1. **Dangers**
   Do not move an injured child unless the child is in danger where he is. Only move the child if you cannot eliminate the danger. Protect yourself.
2. **Ambulance**
   If the child appears to be unconscious, bleeding severely, or is having difficulty breathing, shout for help. Send an adult or older child for an ambulance. Tell them to give the following information:
   - Where the accident is.
   - What's wrong.

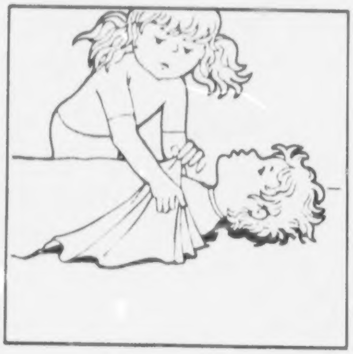
   Tell them not to hang up until told to do so.
3. **A.**
   **Airway**
   Squeeze and shout. Open airway.
4. **B.**
   **Breathing**
   Check for breathing. If the child is not breathing, begin **Rescue Breathing.**
5. **C.**
   **Circulation**
   Check for serious bleeding (i.e. arterial bleeding). Begin first aid for serious **Bleeding.**
6. **Shock**
   Give first aid for shock to every injured student.
7. **Assessment**
   Check for injuries other than ABC problems. Send someone to call an ambulance if needed.

# Care for Shock

## What to look for:

The child may
- appear pale, grey or mottled
- have cold, clammy skin
- feel weak
- have irregular breathing
- appear anxious or apathetic
- feel nauseous or thirsty

**CAUTION:** Many injured children experience shock, sometimes immediately, sometimes hours after an accident. **Shock can cause death.** As a preventive measure **always** give care for shock to an injured child.



1. If the child is conscious, keep him lying down.
2. Elevate the child's legs 20 cm (8″) unless you suspect a broken bone or back injury.
3. Maintain normal body temperature. In most instances you will need to cover the child to keep him warm. If there are no neck or back injuries or broken bones suspected, place a blanket under the child.
4. Comfort and reassure the child.
5. Encourage regular full breaths.
6. Continuously check that the child is conscious and breathing. Check wound sites to ensure that bleeding has not resumed.
7. If the child becomes unconscious treat for **Unconsciousness.** If the child stops breathing give **Rescue Breathing.**
8. Elevate the child's head and shoulders if breathing is difficult unless you suspect head, neck or back injuries.

**CAUTION:** Do not give food or fluids. Severely injured children may require surgery.

**Note:** Shock is oxygen deprivation in the brain and other vital organs. It is caused by a serious reduction in blood pressure and/or volume. Blood volume and pressure can be reduced by many factors, including heavy loss of blood, loss of fluid as a result of burns, and the body's response to pain or fear.

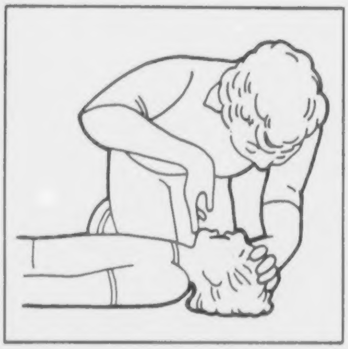
# Rescue Breathing

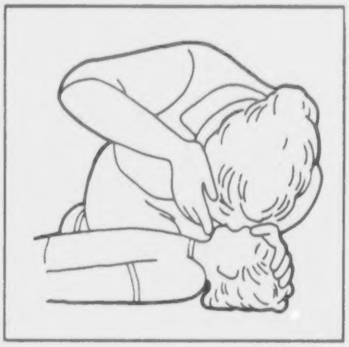
**If a child appears to be unconscious:**

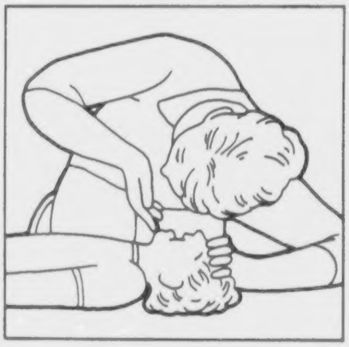
1. Squeeze the child's shoulders and shout, "Are you OK?" If no response, shout for help and send someone to call an ambulance.

**CAUTION:** If you suspect a neck, head or back injury, do not tilt the head. Gently lift the chin without moving the neck or pressing on the forehead. Tilt the head only if you cannot inflate the chest.

2. Tilt the head to open the airway. Lift the chin with one hand and push down on the forehead at the same time with the other.
3. Check for breathing. Place your cheek near the child's nose and mouth. Listen and feel for air. Look for movement of the chest.
4. If the child is breathing, care for **Unconsciousness.**
5. If the child is not breathing, pinch the nostrils closed. Use the thumb and forefinger of the hand that is on the child's forehead.
6. Seal your mouth tightly around the child's mouth. Blow in two slow breaths of air. Take your mouth away after each breath.
7. Release the nostrils. Look for movement of the chest.
8. If the chest has not moved, make sure the head is tilted enough. Pinch the nostrils closed, blow in two breaths, and watch for movement of the chest.
9. If the chest still does not move, care for **Choking: Unconscious** steps 5-7.
10. Give one breath every 4-5 seconds until the ambulance arrives or the child starts breathing again.





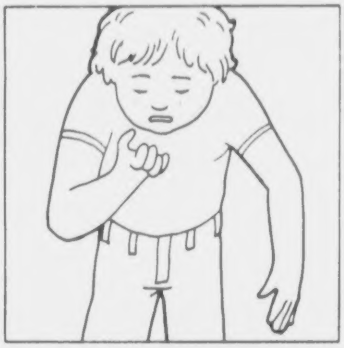


11. Care for **Shock.**

**Note:** If the child vomits during Rescue Breathing, roll him on his side, clean out the mouth, then resume Rescue Breathing.

# Choking:

## Conscious



**If the child can breathe, speak or cough forcefully;**

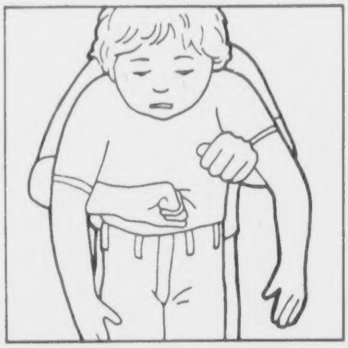
1. Encourage the child to bend forward and cough up the foreign object.
2. Do not slap the child on the back. Stay with him and monitor breathing.

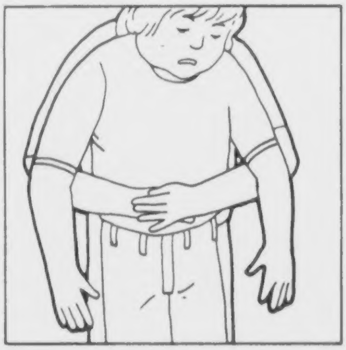
**If the child cannot breathe, cough or talk, turns blue, or is making a high-pitched noise:**

3. Shout for help and send someone to call an ambulance.
4. Stand behind the child and place your arms around his waist.
5. Make a tight fist. Place it just above the navel, thumb against the abdomen.
6. Place your other hand over the fist.
7. Press your fist into the abdomen with quick upward thrusts.
   (Heimlich Manoeuvre)

**CAUTION:** Adjust the force of the thrust to the size of the child. Use less force for a smaller child.

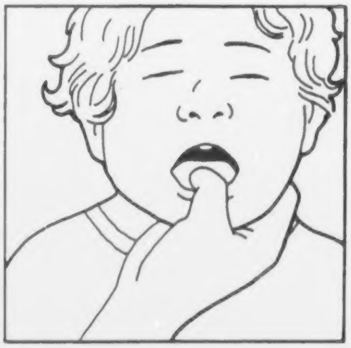
8. Continue the thrusts until the object has been expelled, or the child becomes unconscious. Treat for **Choking: Unconscious.**
9. After the object is expelled, seek medical attention immediately.
10. Care for **Shock.**



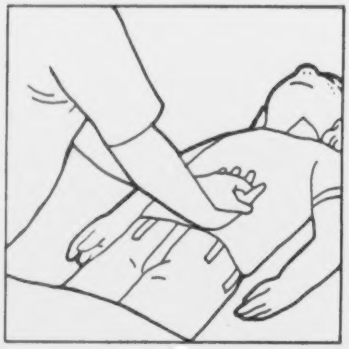


# Choking:
## Unconscious

### If a child is choking and becomes unconscious:



1. Ensure an ambulance has been called.
2. Roll the child onto his back.
3. Check the mouth. Grasp the tongue and lower jaw. If you can see the object, remove it, taking care not to push it in further.
4. Try to blow in two slow breaths of air. If air enters, give **Rescue Breathing.**



5. If the breath does not go in, place the heel of your hand in the middle of the child's abdomen, below the rib cage, just above the navel. Place the other hand on top.
6. Press into the abdomen using quick upward thrusts with increasing force. Repeat 6-10 times. (Heimlich Manoeuvre)

**CAUTION:** Adjust the force of the thrust to the size of the child. Use less force for a smaller child.

7. Repeat steps 3-6 until the object is expelled.
8. When the object is expelled, refer to **Rescue Breathing.**

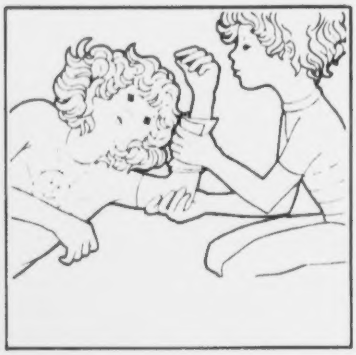
# Bleeding

## Cuts and Wounds

1. Apply direct pressure to the cut with a clean cloth. If nothing clean is available, use your hand with the fingers flat.
2. Elevate a bleeding limb higher than the heart, unless you suspect a broken bone.
3. For all severe bleeding, shout for help. Send someone to call an ambulance immediately.
4. Have the child lie down and keep still.
5. If the cloth soaks through, **do not remove it.** Apply a second cloth on top.
6. Tie the cloth in place with a bandage. Never tie a bandage to the neck. Maintain pressure with your hand over the wound.

**After the bleeding has stopped:**

7. Immobilize an injured limb if transporting the child is absolutely necessary.
8. Check circulation frequently. If the area below the wound is cold or blue, the bandage is too tight.
9. Care for **Shock.**
10. Seek medical attention.



## Nose Bleeds

1. Have the child sit down.
2. Tilt the child's head forward slightly.
3. Pinch the nose firmly.
4. Hold firmly for 10 full minutes without checking.
5. If bleeding continues, seek medical attention.

## Scrapes

1. Clean the scraped area by flushing it with running water.
2. Gently wash the area around the wound with soap and water.
3. Blot dry with a sterile gauze dressing.
4. Cover with a sterile non-stick dressing.

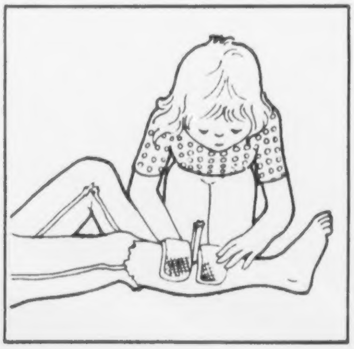
**Note:** Seek medical attention if the scrape is over a large area or if it becomes infected. If infected, it will be red around the scrape and sore to the touch.

# Impaled Objects

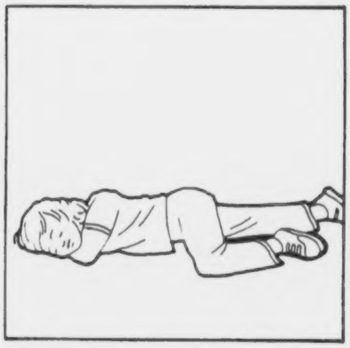
**CAUTION:** Do not remove an impaled object, as severe bleeding and increased damage may result.

1. Cut clothing away from the wound site.
2. Stabilize the object and control bleeding by applying bulky dressings around it.
3. Hold the dressings in place with bandages.
4. Seek medical attention immediately.
5. Care for **Shock.**

**Note:** If an object appears to have punctured the chest wall, seal the wound with a piece of plastic or your hand. Place the child in semi-prone position, injured side down. Monitor airway and breathing constantly.



# Internal Bleeding



**What to look for:**
Suspect internal bleeding if the child has received a severe blow to the chest, back or abdomen. One or more of these signs may be evident:

- pain over the injured spot
- bright foamy blood coughed up
- vomit that is red in colour
- bleeding from any body opening
- feeling of faintness
- swelling
- air hunger (yawning or gasping)
- severe thirst

**CAUTION:** Do not elevate the feet. Do not give the child anything to drink. Do not move a child who may have a head or neck injury, unless breathing is a problem.

1. Place the child in the semi-prone position.
2. Send someone to call an ambulance.
3. Care for **Shock.**

# Unconsciousness

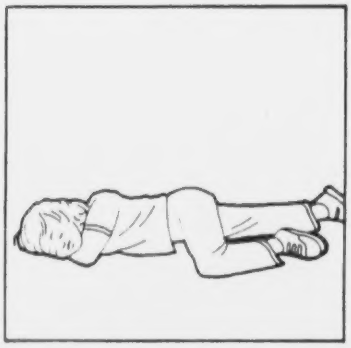
**If a child appears to be unconscious:**

**CAUTION:** Do not move the child if a neck or back injury is suspected.

1. Squeeze the child's shoulders and shout "Are you OK?" If no response, shout for help and send someone to call an ambulance. If the child is not breathing, give **Rescue Breathing.**
2. If the child is breathing, and you do not suspect a neck or back injury, place the child in the semi-prone position. Watch the mouth for blood or fluids. Clear with a cloth.
3. If you suspect a neck or back injury, do not move the child.

   Check for blood, fluids or noisy breathing. If there is none, do not move the child. **Listen and watch for fluids constantly** until the ambulance arrives.

   If you hear gurgling, or noisy breathing, or see fluid, roll the child into the semi-prone position immediately. Turn the body as a unit. Avoid twisting the neck. Ask other adults to assist you. Clear the mouth with a cloth.



4. Constantly check breathing. If it stops, give **Rescue Breathing.**
5. Check for a Medic Alert bracelet or necklace.
6. Care for **Shock.**

# Fainting

**What to look for:**

Fainting may be preceded by

- paleness
- sweating
- dizziness
- nausea

1. If you think that the child is about to faint, have him lie down and elevate his feet 20 cm (8").
2. Loosen tight clothing.
3. If the child becomes unconscious, open the airway.
4. Check for breathing. Place your cheek near the child's nose and mouth. Listen and feel for air. Look for movement of the chest. If not breathing give **Rescue Breathing.**
5. If the child is breathing, or when he resumes breathing, place him in the semi-prone position.
6. Check for a medic alert bracelet or necklace.
7. If there is no recovery in 3 minutes, the problem is more serious than fainting. Send someone to call an ambulance immediately.
8. Care for **Shock.**

# Diabetes

**What to look for:**

A diabetic child who has taken too much insulin, missed a meal, or exercised too much may show any of the following:

- moist, ashen or pale skin
- cold sweat
- hunger
- shallow breathing
- confusion
- shaking
- dizziness.

**CAUTION:** If this condition is not handled immediately, the child may become unconscious.

## If the child is conscious:

1. Give the child a glass of juice, candy or any other sugar.
2. Seek medical attention immediately.
3. Care for **Shock.**

## If the child is unconscious:

1. Place the child in the semi-prone position.
2. Send someone for an ambulance immediately.
3. Place a **small** pinch of sugar under her tongue. Repeat when the sugar has dissolved. Do not give the child anything to drink.
4. Care for **Shock.**

# Spinal and Head Injuries

**What to look for:**
One or more of these signs may be evident if there is a spinal injury.

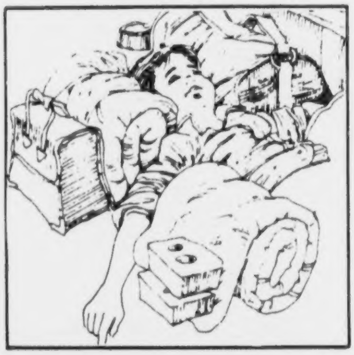
- loss of motion or sensation below the injury
- pain at the site of the injury
- light muscle flinching
- "pins and needles" sensation below the site of the injury
- confusion
- loss of coordination

**What to look for:**
A child with a head injury may show any of the following:

- headache
- dizziness, or disorientation
- nausea or vomiting
- drowsiness
- loss of consciousness
- bleeding or clear fluid from ear or nose

A fall of 15 cm (6") onto a hard surface is sufficient to cause a head injury. Seek medical attention immediately. A head injury is often more severe than it may seem.

**CAUTION:** Any head injury may mean the child has a spinal injury. Unless the child's life is in danger, **do not move the child.**

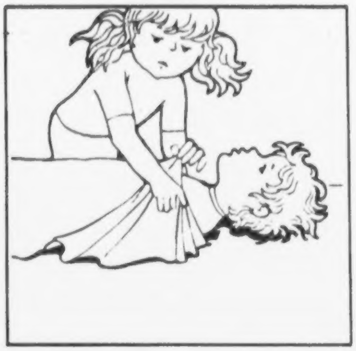


1. Check for consciousness without moving the child. Squeeze the child's shoulders, and shout, "Are you OK?" If no response, shout for help and send someone for an ambulance.
2. Check for breathing. Place your cheek near the child's nose and mouth. Listen and feel for air. Look for movement of the chest.
3. If the child is not breathing, give **Rescue Breathing.**
4. If the child is breathing and unconscious, treat for **Unconsciousness.**
5. If conscious: If you suspect a spinal injury, immobilize the head in the position you found the child. Use towels or clothing and hold them in place with rocks or bricks.
6. Care for **Shock.**

## Seizures

1. Protect the child's head and limbs from injury by removing objects nearby. Place soft articles such as pillows between the child's head and immovable objects such as walls and heavy furniture.
2. Do not interfere with the child's movements.
3. Do not put objects between the teeth.
4. After the seizure, if the child is unconscious or sleepy, place him in the semi-prone position.
5. Care for **Shock.**

# Broken Bones



**Caution:** Do not move a broken bone. Call an ambulance; the attendants will splint the bone.

**What to look for:**
The presence of only one of these signs is sufficient to call an ambulance:
- severe pain or tenderness to the touch
- distortion of a limb
- loss of circulation in a limb (toes/ fingers are white or blue)
- loss of feeling in a limb (Can the child feel a squeeze of the fingers/ toes?)
- swelling and discoloration
- child reports having heard a cracking sound

1. Encourage the child not to move.
2. Immobilize the broken limb where the child is lying. Use towels or blankets to stabilize the limb.
3. Call an ambulance.
4. Care for **Shock.**

**Note:** Treatment for dislocations is the same as for broken bones.

## Bleeding (Compound fracture)

1. Gently place a cloth over the wound. Use a sterile dressing or clean cloth.
2. Apply pressure around but not on the wound. Pressure should be sufficient to control the bleeding without moving the broken bone.
3. Do not elevate the limb.
4. If bleeding is not controlled, apply a second bandage over the first.
5. Call an ambulance immediately.
6. Care for **Shock.**

## Sprains & Strains

**What to look for:**

A **sprain** is an injury to a joint. The child may have:
- swelling
- pain
- discoloration
- loss of movement

A **strain** is an injury caused by overstretching the muscles. The child may have:
- pain
- swelling

1. Encourage the child not to move.
2. If you suspect a sprain, do not move the child unless necessary. The injury could involve a broken bone.
3. Apply cold to the injured area. Do not allow ice to touch the skin. Wrap the ice in a towel or cloth.
4. Seek medical attention.
5. Care for **Shock.**

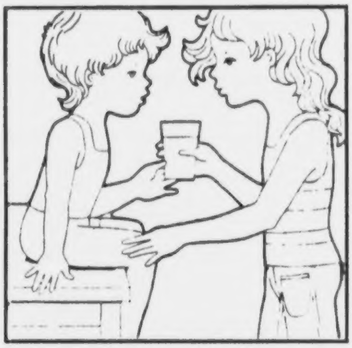
# Poison

## Swallowed — Conscious Child

**What to look for:**
If a chemical has been swallowed, the child may have the following:
- burning sensation in the mouth, throat, stomach
- cramps, gagging, diarrhoea.

If a plant or drug has been swallowed, the child may have the following:
- vomiting, convulsions
- drowsiness, slurred speech
- lack of coordination
- dizziness

1. Identify the poison.
2a. **Drugs and medicine:** Do **not** give the child liquids. Call the Poison Control Centre for instructions.
2b. **All other poisons:** First give the child half a glass of water, then immediately call the Poison Control Centre for instructions. If Poison Control is not listed in your phone book, call your hospital or doctor.
3. Care for **Shock.**



**Note:** Store in your first aid kit two or more 50 ml bottles of Syrup of Ipecac to induce vomiting. Use only when instructed by the Poison Control Centre. If the child is transported to a medical facility, send the poison (container, plant, etc.) and a sample of any vomit with the child to the hospital.

## Swallowed — Unconscious Child

**What to look for:**
If a chemical has been swallowed, the child may
- have burns on or in the mouth
- not be breathing
- be unconscious

If a plant or drugs have been swallowed, the child may
- vomit
- be unconscious
- not be breathing
- have convulsions

**CAUTION:** Never attempt to make an unconscious child vomit.

1. Squeeze the child's shoulders and shout, "Are you OK?" If no response, shout for help and send someone for an ambulance. If not breathing, give **Rescue Breathing.**
2. If the child is breathing, place in the semi-prone position and treat for **Unconsciousness.**
3. Care for **Shock.**

**Note:** If the child is to be transported to a medical facility, send the poison (container, plant, etc.) and a sample of any vomit with the child to the hospital.

# Poison

## On the Skin

### What to look for:

The child who has come into contact with chemicals or a poisonous plant will have any of the following:

- burning, itching, swelling, blisters
- headache, fever.

1. Remove chemically contaminated clothing. Be careful not to contaminate yourself.
2. Flush the skin with cool water for at least 10 minutes. Be careful to avoid getting any of the chemical into the child's eyes.
3. Do not break blisters.
4. Identify the poison.
5. Call the Poison Control Centre for advice.
6. Care for **Shock.**

## Inhaled

### What to look for:

The child may have any of the following:

- irritated eyes, nose, throat
- coughing, shortness of breath, dizziness
- vomiting, convulsions
- bluish colour around the mouth
- unconsciousness

1. Take the child to fresh air. Protect yourself from the gases.
2. Squeeze the child's shoulders and shout, "Are you OK?" If no response, shout for help and send someone for an ambulance. If child is not breathing give **Rescue Breathing.**
3. If the child is unconscious and breathing: place in semi-prone position and treat for **Unconsciousness.**
4. If the child is conscious, call the Poison Control Centre for advice.
5. Care for **Shock.**

# Burns

## Heat Burns

**CAUTION:** Clothes may stick to the skin. Do not remove them. Do not break blisters. Never use greasy ointments, butter, lotions or creams.

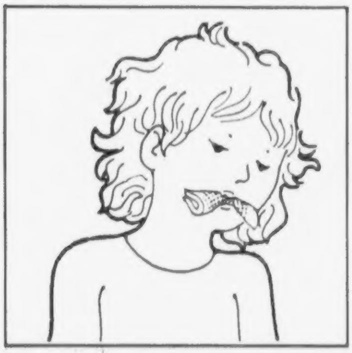
1. Immerse the burned area in cold water for at least 5 minutes and as long as the pain lasts. Do not use ice.
2. Cover the burn with a sterile, non-stick dressing.
3. Serious burns require immediate medical attention. These include red burns 5 cm (2") or more in diameter and all burns which are blistered, white or black.
4. Care for **Shock.**

## Chemical Burns

**CAUTION:** If the chemical is a powder, brush off as much as possible with a clean cloth before flushing with water.

1. Remove contaminated clothing.
2. Flush the skin with large amounts of cold water for 15 minutes. Use a shower or hose for large body areas.
3. Cover the burned area with a sterile cloth.
4. Seek medical attention immediately.
5. Care for **Shock.**

# Teeth



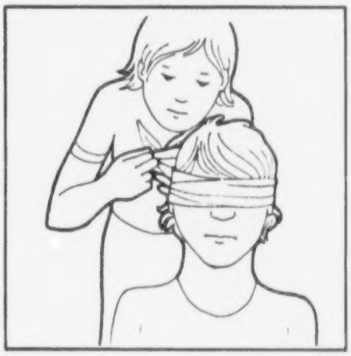
**If a tooth is knocked out or broken:**

1. Tilt the child's head forward to prevent choking on blood.
2. Use direct pressure on mouth wounds. Use a piece of gauze or clean cloth over the socket. Have the child bite down to hold the dressing in place.
3. Collect knocked-out or broken teeth. If soiled, place them in a moist cloth and keep them warm in the palm of your hand. If the child is old enough, place clean teeth between the gum and the cheek. Have the child bite down to avoid swallowing the teeth.
4. Seek **dental** attention immediately to have the tooth re-implanted.
5. Care for **Shock.**

# Eyes

## Foreign Object Embedded in the Eye

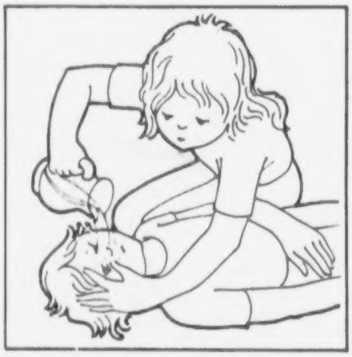
1. Instruct the child not to rub the injured eye.
2. Do not remove a foreign object.
3. Do not remove contact lenses.
4. Cover both eyes to reduce eye movement. Use a loose bandage to avoid pressing foreign objects against the eye.
5. Seek medical attention immediately.
6. Care for **Shock.**



## Chemical in the Eye

**CAUTION:** Do not wash the chemical into the uninjured eye.

1. Flush the eye thoroughly with lukewarm water for at least 15 minutes.
2. Cover both eyes to reduce eye movement.
3. Seek medical attention immediately.
4. Care for **Shock.**



# Bites and Stings

## Insects

**CAUTION:** Most insect bites, although painful and uncomfortable, are harmless. However, if a child shows signs of breathing difficulty, call an ambulance immediately. If a bee or wasp sting causes a reaction, find out if the child is carrying a "sting kit", and help him use it.

1. Wash the affected area. Remove the stinger by gently scraping the skin with a knife. Do not use tweezers as squeezing the stinger may inject more poison.
2. Apply a cold compress to the bite area to control swelling. Calamine or other lotion may be used to relieve itching.
3. Care for **Shock.**

# FIRST AID KITS

## Field Trips

When making arrangements to take a group of students on a short field trip, plan to take along a first aid kit which includes **at least** the following items. Use a checklist to ensure that you have not forgotten any item.

2 Triangular bandages ☐
2 Small wound dressings ☐
2 Medium wound dressings ☐
10 Non adherent wound dressings ☐
2 3-cm Gauze rolls ☐
2 5-cm Gauze rolls ☐
1 Tape roll ☐
20 Alcohol wipes ________ ☐
____________________ ☐
____________________ ☐
____________________ ☐

40 Bandage strips ☐
1 Tweezers ☐
Mild antiseptic ☐
2 Elastic roller bandages ☐
20 Safety pins ☐
1 Scissors ☐
Red Cross First Aid reference manual ☐
____________________ ☐
____________________ ☐
____________________ ☐
____________________ ☐

## Wilderness Trips

To protect your students on a wilderness day trip, during the summer months, include **at least** the following items in your first aid pack. Use a checklist to ensure that you have not forgotten any item.

2 Triangular bandages ☐
2 Small wound dressings ☐
2 Medium wound dressings ☐
10 Non-adherent dressings ☐
4 3-cm Gauze rolls ☐
4 5-cm Gauze rolls ☐
1 Tape roll ☐
1 Scissors ☐
20 Alcohol wipes ☐
40 Bandage strips ☐
Mild antiseptic ☐
2 Elastic roller bandages ☐
10 Safety pins ☐
Coins (emergency phone calls) ☐
Salt tablets ☐
Needle and thread ☐
Waterproof, windproof matches ☐
________________ ☐
________________ ☐
________________ ☐

1 Knife ☐
1 Flashlight ☐
1 Whistle ☐
1 Blanket or sleeping bag ☐
2 Splints ☐
10 Splint ties ☐
Burn cream ☐
Halazone tablets ☐
Hard candies ☐
Sun screen ☐
Insect repellent ☐
Moleskin ☐
Pencil and paper (messages) ☐
Soap ☐
Lip balm ☐
2 Instant cold packs ☐
Red Cross First Aid reference manual ☐
________________ ☐
________________ ☐
________________ ☐

Always be prepared for an emergency situation! For mountain trips, make sure every student has sufficient clothing to handle extreme changes in weather.

## ACCIDENT REPORTING

All school districts require that an accident report be completed for every student who has been involved in a school-related accident. For the most part, copies of the report are filed at the School District Office and at the particular school where the accident occurred.

Although the format of the accident report as well as the reporting/filing procedures will vary from school district to school district, the information required is usually the same.

Accident reports should be designed to record **at least** the following information:

**Name, age, address** and **telephone number** of the injured student;

**Date** and **time** of the accident;

**Details** of the accident (location, circumstances and number of people involved);

**Nature** of the injury (part of body and severity of injury);

**First aid** administered to the student at the time of the accident;

**Names of witnesses;**

**Name of person delivering first aid;**

**Attending physician** or **admitting hospital**;

**Name of supervisory teacher.**

In addition to the legal requirements of accident reporting, schools can benefit tremendously from maintaining accurate accident records. From them can be secured the following:

**Data:** Such information can be used in the future to classify the types and severity of accidents occurring in a particular school.

**Guidance:** Students, teachers and parents can all learn from real experience ways to avoid accidents in the future; safety materials for students can be devised directly from the data recorded.

**Evaluation:** Safety precautions currently in effect can be frequently re-evaluated to maintain a safe environment for students at all times.

**Support**: With the data secured from accident reports, schools are in a much better position to receive such items as better gym apparatus, safer playground equipment, needed sidewalks or crosswalks and better lighting.

# GRADE ONE

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## ALCOHOL AND OTHER DRUGS

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**ALCOHOL AND OTHER DRUGS**

**GRADE 1** **LESSON: 1** **THEME: SAFETY**

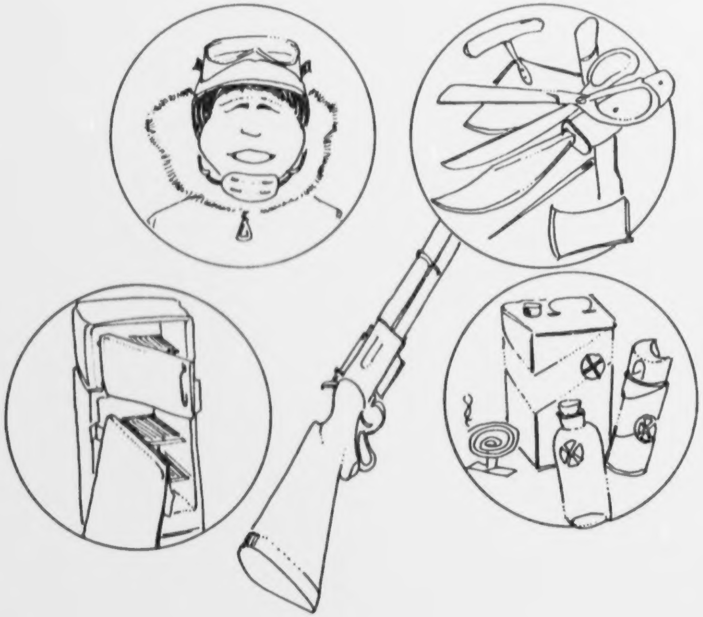
**CONCEPT:** A POISON IS ANYTHING WHICH IS UNSAFE TO TASTE

**PREPARATION:**
1. A copy of Is This Safe To Eat? (Activity Sheets AD 10A to AD 10G)
2. Large poison sign (Activity Sheet AD 11)
3. Collect empty poison containers; some with the poison warning sign on them, some without
4. A copy of Safe to Eat song (Activity Sheet AD 12)
5. Prepare a class set of Find the Poisons worksheet (Activity Sheet AD 13)

**VOCABULARY:** poison, safe, unsafe, sign, warning, poisonous

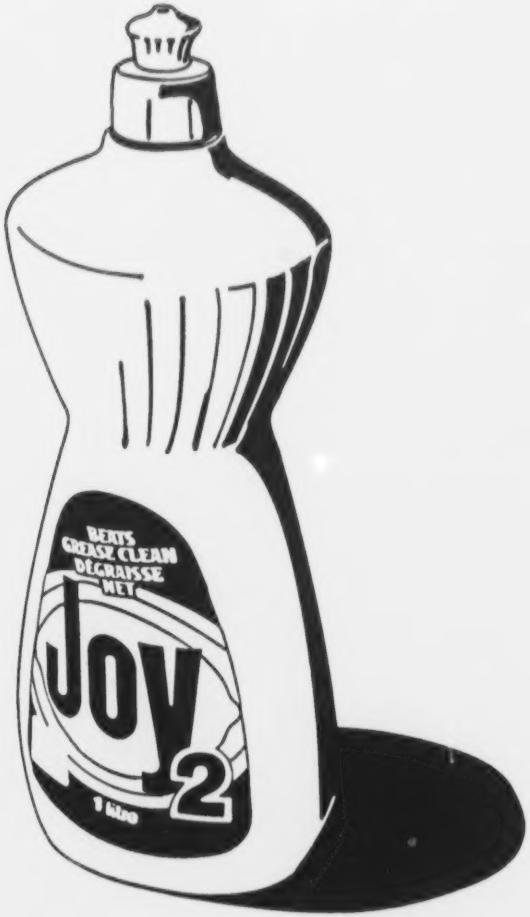
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page 103 - 106.<br>A poison is anything which is unsafe to taste. |
| i) identify some poisonous substances | 1. Identify which substances are safe to taste and which are unsafe. | Refer to Activity Sheets AD 10A to AD 10G.<br>This is a review of Kindergarten, Lessons 1, 2, 3. Using the copy of safe/unsafe substances, ask the students to identify which ones are safe to taste and which are unsafe. They can signal thumbs up for safe and thumbs down for unsafe. |
| | 2. Review the meaning of "poison". | |
| ii) identify the poison warning sign | 3. Tell the meaning of the poison warning sign. | Refer to Activity Sheet AD 11.<br>This is a review of Kindergarten, Lessons 2, 3, 4. Using the poison warning sign, review what the sign tells them. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 4. Identify empty containers which have held poisonous substances. | Show the students empty containers with the poison warning sign. Ask them what was in each one, and what it was used for. (They do not need to know the individual product names.) Ask them how they know there was a poison in each. |
| iii) explain that not all poisons have poison warning signs | 5. Tell if the substances are poisons or not poisons. Tell how they know they are poisons. | Refer to Activity Sheets AD 10A to AD 10G.<br>Show the students the substances which are poisonous but which have no poison warning sign. Ask the students if these are poisons. Ask the students how they know they are poisons.<br>Explain that it is important to be careful because not all poisons have a poison warning sign. Remind students that if they do not know if something is safe to taste, they should not taste, eat or drink it. |
| | 6. Sing "Safe to Eat" song. | Refer to Activity Sheet AD 12.<br>Students learned this song in Kindergarten, Lesson 1. Review the "Safe to Eat" song with the students. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 7. Cut out the small poison warning signs and stick them on the poisonous substances. | Refer to Activity Sheet AD 13.<br>Distribute the "Find the Poisons" worksheets. Students have to cut out the small poison warning signs and stick them on the poisonous substances.<br> |

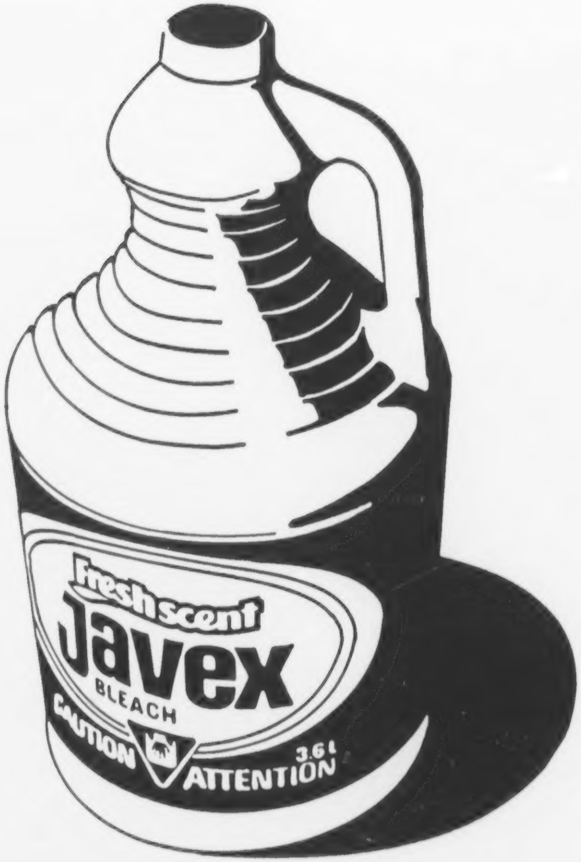
# IS THIS SAFE TO EAT?

**AD 10A**


BEATS GREASE CLEAN
DÉGRAISSE NET
JOY
2
1 litre

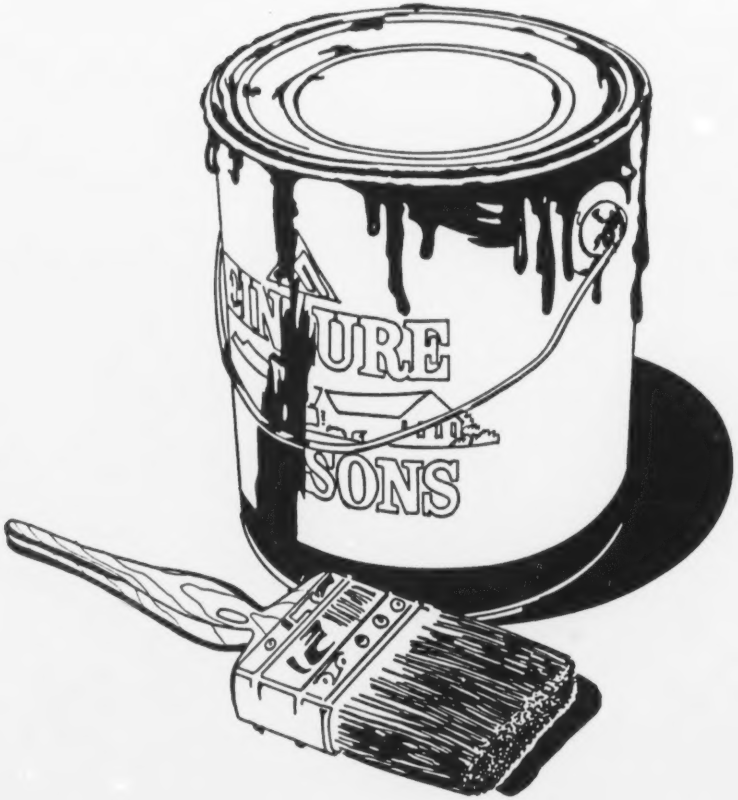
# IS THIS SAFE TO EAT?

AD 10B


Fresh scent
Javex
BLEACH
CAUTION
ATTENTION
3.6 l

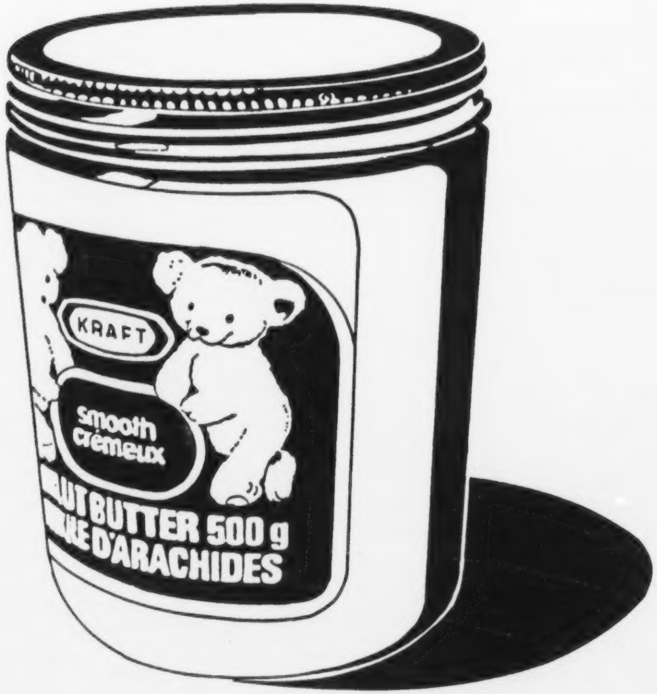
# IS THIS SAFE TO EAT?

**AD 10C**


EIN URE
SONS

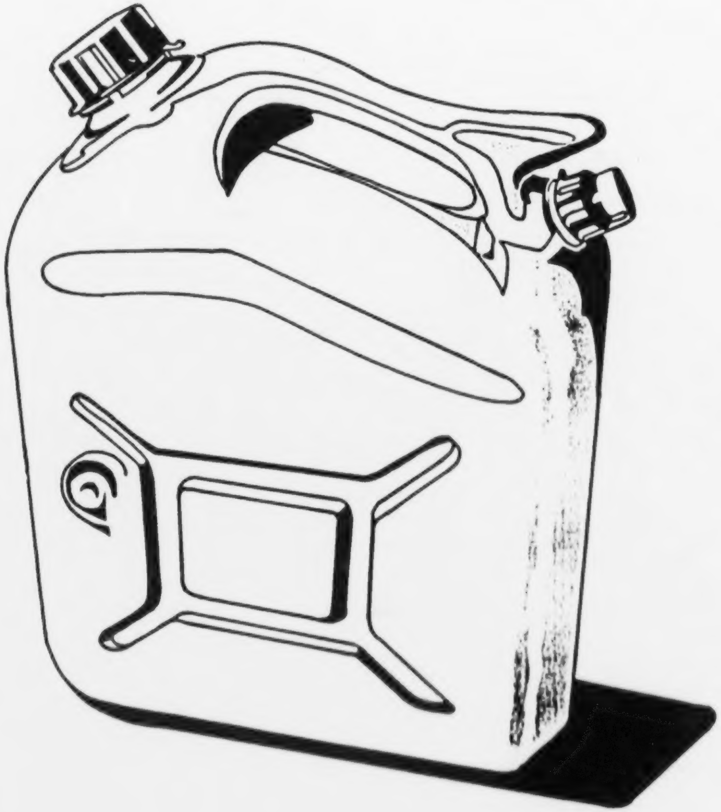
**AD 10D**

# IS THIS SAFE TO EAT?


KRAFT
smooth
crémeux
UT BUTTER 500 g
KE D'ARACHIDES

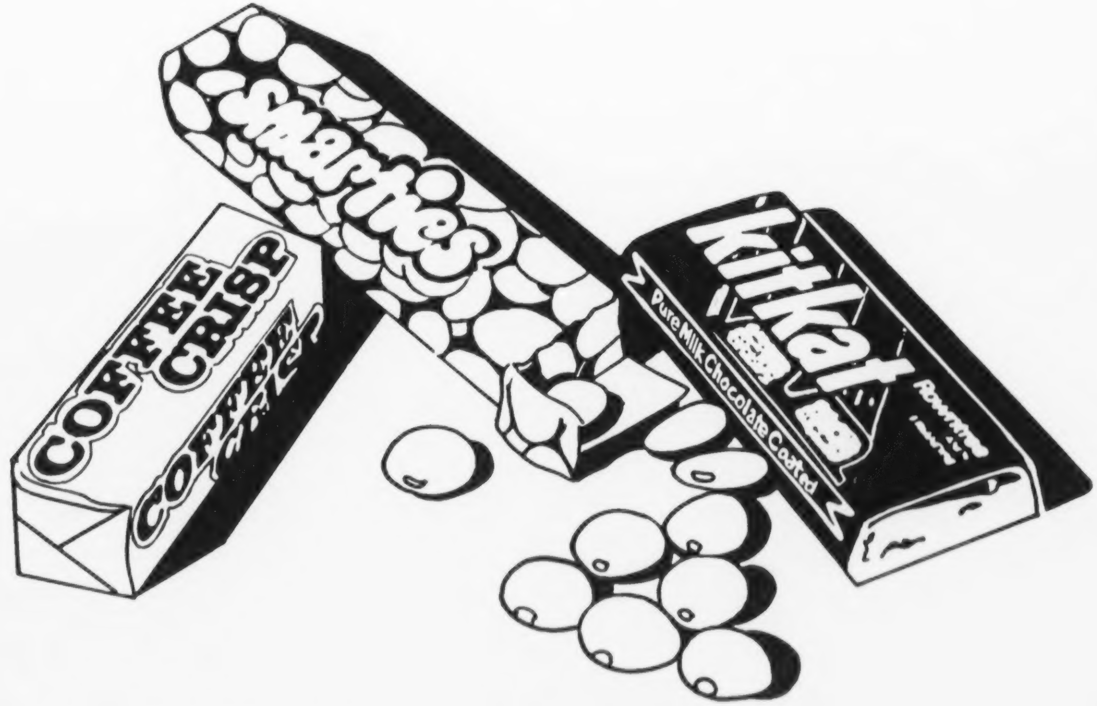
# IS THIS SAFE TO EAT?

AD 10E



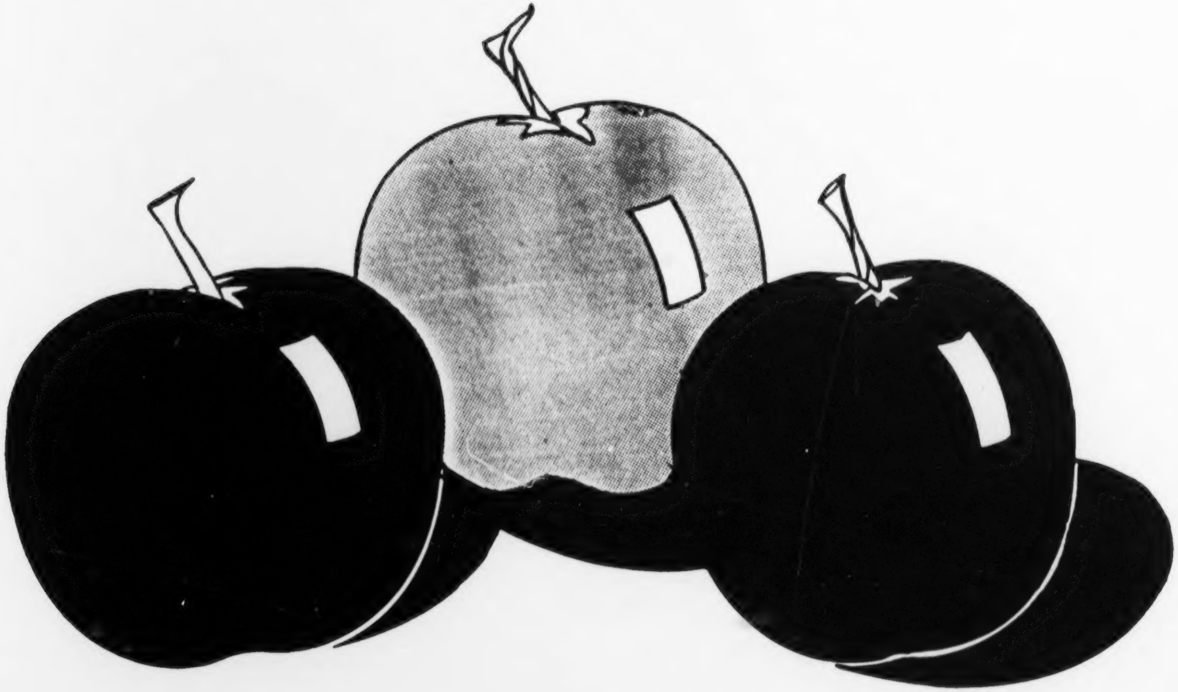
# IS THIS SAFE TO EAT?

AD 10F


COFFEE CRISP
COFFEE
Smarties
KitKat
Pure Milk Chocolate Coated
Rowntree

# IS THIS SAFE TO EAT?

AD 10G



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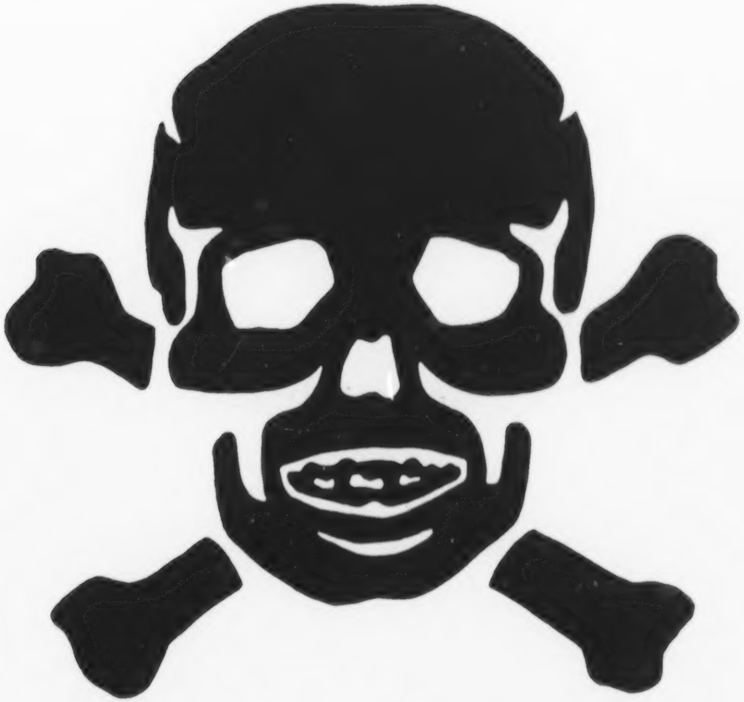
# POISON WARNING SIGN

AD 11



# "SAFE TO EAT"

(Tune: Mary Had A Little Lamb)

**Verse 1: Teacher (showing picture of safe or unsafe substance)**

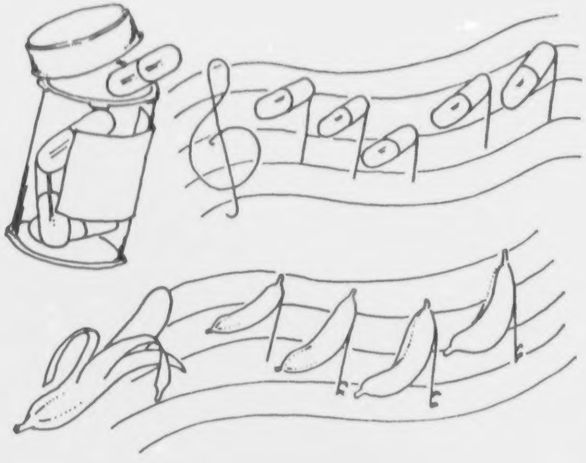
Is this very safe to eat?
Safe to eat?
Safe to eat?
Is this very safe to eat?
Is it safe to eat?

**Verse 2: Students (depending on whether it is safe or unsafe)**
(Nodding and rubbing stomachs)

Yes, it's very safe to eat,
Safe to eat,
Safe to eat,
Yes, it's very safe to eat
Yum, Yum, Yum!

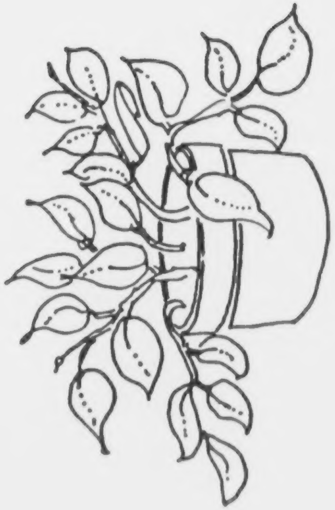
**Verse 3: Students**
(Shaking heads and making faces)

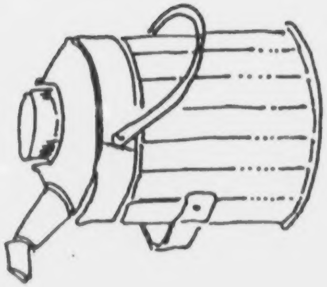
No, it isn't safe to eat,
Safe to eat,
Safe to eat,
No, it isn't safe to eat,
No! No! No! (or Yuk! Yuk! Yuk!)

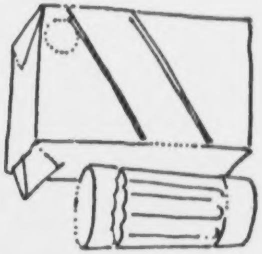


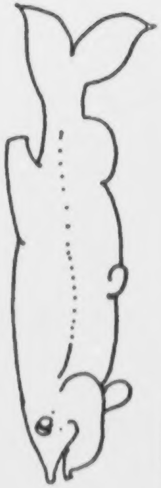
# FIND THE POISONS

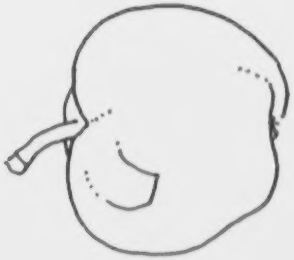
AD 13

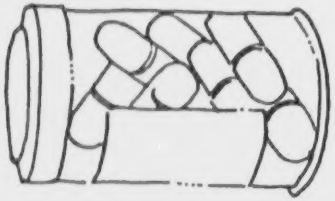


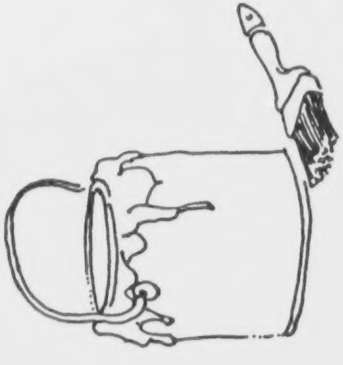


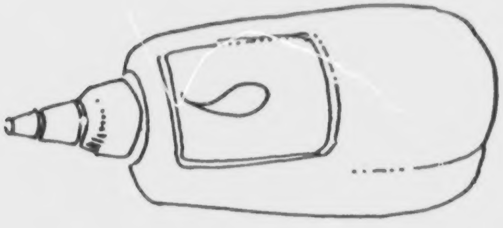


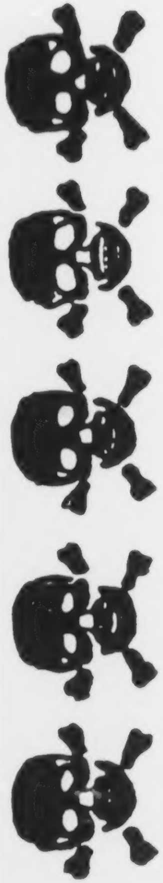












**ALCOHOL AND OTHER DRUGS**

**GRADE 1** **LESSON: 2** **THEME: SAFETY**

**CONCEPT:** SOME SUBSTANCES ARE UNSAFE TO SMELL

**PREPARATION:**
1. 'My Nose Knows' poem (Activity Sheet 13A)
2. Props or pictures of substances which smell good/bad
3. Materials for Perfume and Stinky Books

**VOCABULARY:** smell, perfume

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | |
| i) explain that some smells may make people sick | 1. Discuss a time when they felt sick because of a bad smell. | Ask students to talk about a time when a bad smell made them sick. (E.g. it could be a smell from a felt-tip marker which gave them a headache.) |
| | 2. Tell how they could have prevented feeling sick. | If they had not smelled the substance, they would feel fine. |
| ii) identify substances which are OK/not OK to smell | 3. Say the 'My Nose Knows' poem. | Refer to Activity Sheet 13A<br>Use pictures or props of substances which are OK to smell and substances which are not OK to smell.<br>Hold up the prop or the picture and have the students say the appropriate verse of the poem. |

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| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Make a 'Perfume' and a 'Stinky' Book. | Divide students into small groups. Have some groups make Perfume books, i.e. things which are nice to smell, and others Stinky books – things which smell awful. They can draw or cut out pictures. |

# MY NOSE KNOWS

**AD 13A**

My nose knows
This is no good to smell
From my head to my toes
It will make me unwell.

My nose knows
This is OK to smell
From my head to my toes
I'll still feel well!

Helen Balanoff

## ALCOHOL AND OTHER DRUGS

**GRADE 1** **LESSON: 3** **THEME: SAFETY**

**CONCEPT:** CHILDREN SHOULD ASK AN ADULT THEY TRUST BEFORE TASTING ANY UNKNOWN SUBSTANCE

**PREPARATION:**

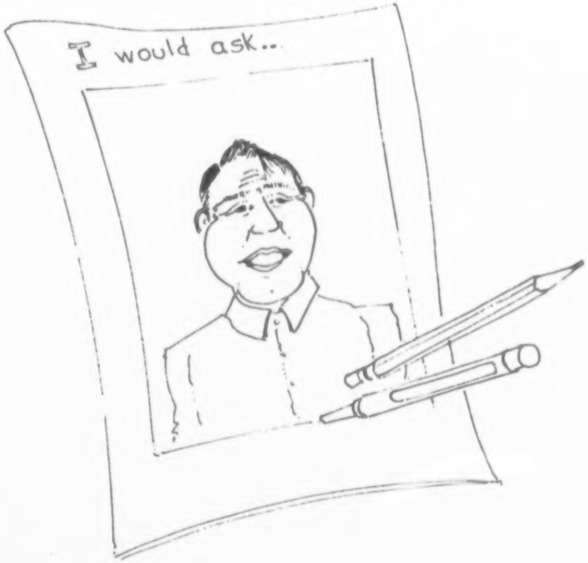
1. Make flannelgraph figures for the "Eating Berries" story (Activity Sheets AD 14A to AD 14E)
2. Flannelgraph board
3. Read and become familiar with the story "Eating Berries" (Activity Sheet AD 15)
4. Container with an unknown substance
5. The large poison sign (Activity Sheet AD 11) from Lesson 1
6. "Who Can Tell Us If The Berries Are Safe" song (Activity Sheet AD 16)
7. Dress-up clothes to look like mother, father, grandmother, etc.
8. Art materials

**VOCABULARY:** poison, safe, unsafe, careful, trust

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to: | Students: | Background Information: Page 101, 104. |
| i) explain that not all poisons have a poison warning sign | 1. Tell if they have ever picked berries before. | Discussion:<br>- Have you ever picked berries?<br>- Let students talk about a time when they picked berries. |
| | 2. Listen to the story "Eating Berries" and then talk about what happened in it. | Refer to Activity Sheets AD 14A to AD 14E and AD 15.<br>Tell the story "Eating Berries", using the flannelgraph figures. |

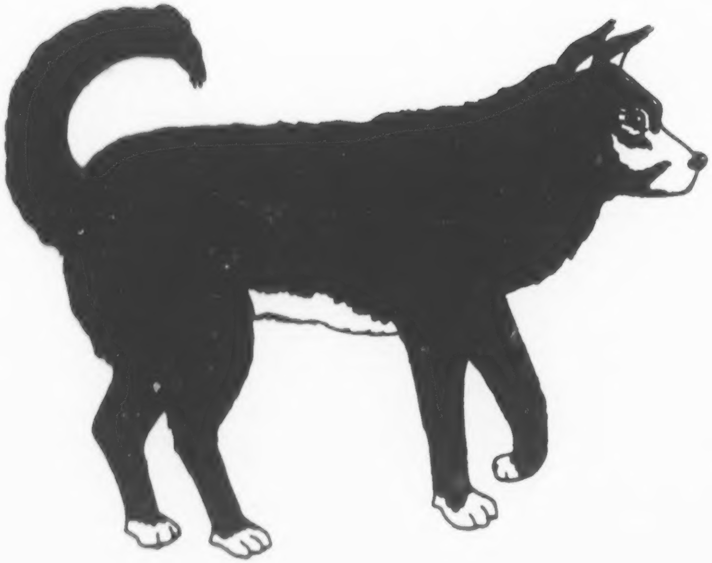
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Discussion:<br>- Talk about what happened in the story.<br>Story discussion continues in Student Activities 3 and 4. |
| | 3. Tell the meaning of the poison warning sign and identify poisonous substances which do not have the poison warning signs. | Refer to Activity Sheet AD 11 from Lesson 1.<br>Show the students the poison warning sign. Remind them that this is one way of telling if something is a poison, but that some poisons (like the berries in the story) do not have poison warning signs on them. It is important to be careful, because children do not always know if something is a poison.<br>Name other poisonous substances which do not have poison warning signs. |
| ii) explain why they should ask an adult they trust before tasting any unknown substance | 4. Tell what to do when they don't know if a substance is poisonous. | Refer to Activity Sheet AD 15.<br>Discussion:<br>- Who told Tommy and Bobby not to eat the poison berries?<br>- How did Grandma know which berries were poison berries? (Older, learned from her parents, etc.) |
| | 5. Talk about why they should always ask an adult they trust before tasting any unknown substance. | Ask students to talk about why they should always ask an adult they trust before tasting any unknown substance. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 6. Name someone they know who can tell them if unknown substances are safe to taste. | Ask the students to name someone who can tell them if the berries (or anything else they do not know about) are safe to taste.<br>Show students a container with an unknown substance. Use a chain drill and the following sentence patterns:<br>Teacher (holding container): Who can tell ***you*** if this is safe to eat?<br>First student: ***My Granny*** can tell me if this is safe to eat.<br>First student: Who can tell ***you*** if this is safe to eat?<br>Second Student: **My teacher** can tell me if this is safe to eat.<br>Etc.<br>The person who is talking should hold the container which is passed from person to person. |
| | 7. Learn "Who Can Tell Us If The Berries Are Safe" song. | Refer to Activity Sheet AD 16.<br>Teach the students the words of the song, "Who Can Tell Us If The Berries are Safe?"<br>Using the clothes from the dressing-up box, choose a student to dress up to look like an adult he trusts, eg. scarf for the mother, cap for the father, etc. The other students can point to the person as they sing. |

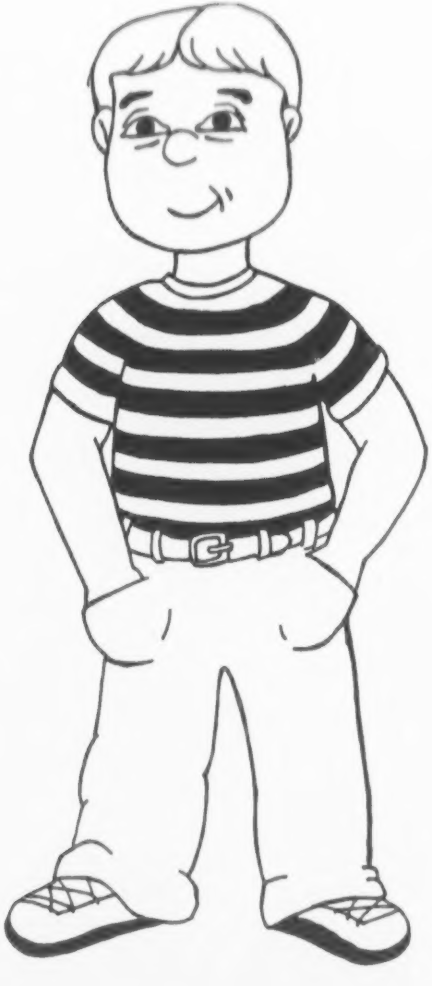
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 8. Draw a picture of someone who can tell them if the berries are safe. | Ask the students to draw a picture of someone who can tell them if the berries are safe.<br><br> |

# FLANNELGRAPH FIGURES FOR EATING BERRIES

AD 14A



# FLANNELGRAPH FIGURES FOR EATING BERRIES AD 14B



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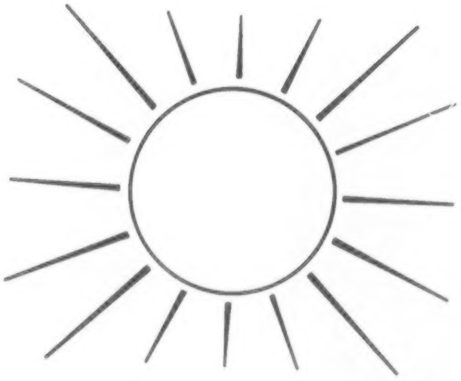
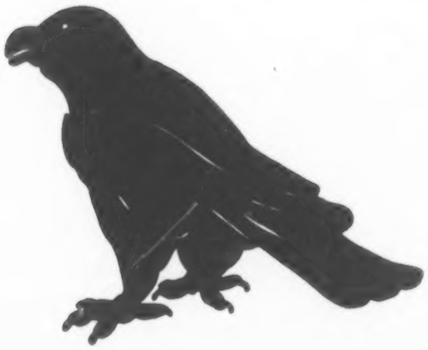
# FLANNELGRAPH FIGURES FOR EATING BERRIES AD 14C





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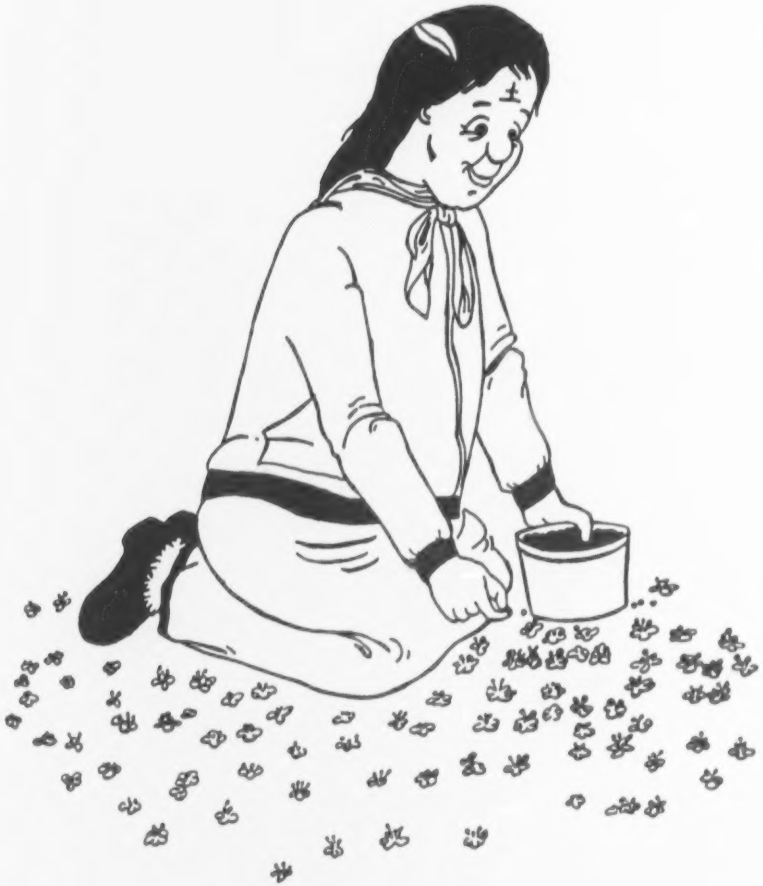
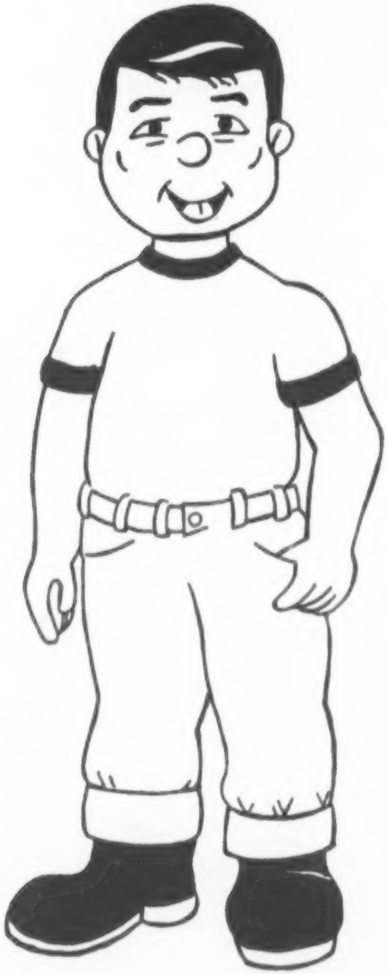
# FLANNELGRAPH FIGURES FOR EATING BERRIES

AD 14D



# FLANNELGRAPH FIGURES FOR EATING BERRIES AD 14E



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# EATING BERRIES

**AD 15**

It is a nice summer day. The sun is shining. Here is Tommy. Tommy is playing outside his house with his dog. Tommy throws the ball and his dog chases it. They are having fun!

Here is Grandma. Grandma is going to pick blueberries. "Do you want to come with me, Tommy?"

"Oh, yes," says Tommy.

So Grandma and Tommy go to the hill to pick blueberries. Tommy's dog goes too.

As they walk up the hill, they see Tommy's friend. His name is Bobby. "We're going to pick blueberries," says Tommy. "Do you want to come with us?"

"Oh, yes," says Bobby.

So Grandma, Tommy and Bobby all go to the hill to pick blueberries. Tommy's dog goes too.

Grandma walks slowly because she is old, but Tommy and Bobby run and jump and roll on the ground. Tommy's dog plays with them. They see lots of bright summer flowers. There are red ones, yellow ones, purple ones, and orange ones - all the colours of the rainbow!

Soon they come to a big patch of berries. There are lots of juicy blueberries - big ones and small ones. Grandma, Tommy and Bobby start to pick the berries. They put them in their baskets. They eat some too. Tommy walks to another patch of berries. It is near the pond.

He shouts loudly, "Grandma, come here! I've found the biggest berries over here!" His hand is full of big ripe berries. He is just going to put them into his mouth and eat them.

Grandma says, "No, Tommy! Don't eat these berries! They aren't blueberries! They look like blueberries, but if you eat them, you may get very sick!"

Tommy throws the berries on the ground.

"But Grandma, they look like blueberries!"

"Yes," says Grandma, "they do! They're blue, but if you look carefully, you can see that they are bigger than blueberries. The leaves on the plant are different too. When you are picking berries, you must be very careful, because some berries are safe to eat and some berries are not safe to eat! Some berries are poisons!"

"What will happen to us if we eat some of the other berries?" asks Bobby.

"You may get a sore stomach," says Grandma. "Or, you may get very sick and you'll have to go to the Health Centre."

"Oh, look, Grandma! Here is a big bird." It flies down from the sky and sits on the ground near Grandma and the boys. It watches them carefully for a minute or two and then hops over to the bush with the poison berries. It watches them again, but Grandma, Tommy and Bobby sit very quietly. The bird picks a berry from the bush and eats it, then it eats another one and another one. Tommy stands up and makes a noise and the bird flies away.

"Grandma," says Tommy, "the bird ate the poison berries. Now it will get sick!"

"No," says Grandma. "Birds and animals can eat lots of different berries and not get sick, but people can't eat all of them."

"How do we know which berries are safe to eat?" asks Bobby.

"If you don't know," says Grandma, "you must ask a grown-up that you trust - mother or father or Grandma! They know which berries are safe. When you are big you'll know them too. I know! Let's ask Tommy if he knows now which ones are blueberries. Shut your eyes!"

Grandma picks some berries from the blueberry bush and some of the other berries, too. "O.K. Open your eyes!"

Grandma holds out her hands. "Which berries are safe to eat, Tommy?"

Tommy thinks for a minute. "I know," he says, "these ones!"

"Right!" says Grandma. "How do you know?"

"I remember that the poison berries are bigger than the blueberries!" says Tommy.

"Good for you, Tommy! Now, we must pick some more blueberries," says Grandma, "so that we have lots to take home. We're going to make pies and muffins! And, remember, if you don't know which berries are safe to eat, come and ask me!"

# WHO CAN TELL US IF THE BERRIES ARE SAFE?

(Tune: London Bridge Is Falling Down)

Who can tell us if the berries are safe, berries are safe, berries are safe?
Who can tell us if the berries are safe?
Are the berries safe to eat?

Mother, can you tell us if the berries are safe, berries are safe, berries are safe?
Mother, can you tell us if the berries are safe?
Are the berries safe to eat?

Yes, yes, yes! The berries are safe, berries are safe, berries are safe!
Yes, yes, yes! The berries are safe,
The berries are safe to eat!

No, no, no! The berries are unsafe, berries are unsafe, berries are unsafe!
No, no, no! The berries are unsafe,
They're unsafe to eat!

Grandma, father, etc. can be substituted for mother in Verse 2.

Helen Balanoff
Barbara Hall

**ALCOHOL AND OTHER DRUGS**

**GRADE 1** **LESSON: 4** **THEME: DRUGS**

**CONCEPT:** MEDICINE MAY BE HELPFUL, BUT MAY ALSO BE HARMFUL

**PREPARATION:**

1. Prepare an overhead transparency of A Medicine Cabinet (Activity Sheet AD 17)
2. Sample contents of a typical medicine cabinet
3. Prepare overhead transparencies of Other Safe Storage Places For Medicine (Activity Sheet AD 18A and 18B)
4. Prepare a class set of the parent letter (Activity Sheet AD 19). Have the letter translated if necessary.
5. Prepare a class set of Where Is The Medicine In Your House? (Activity Sheet AD 20)
6. Prepare a class set of the "Safe Home Certificate" (Activity Sheet AD 21)
7. Prior to class, arrange for a visit for students to see where medicine is kept in the school or at the Community Health Centre

**VOCABULARY:** safe, medicine, cabinet, keep, kept, reach, harmful

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) explain that medicine may help a person who is ill | Students:<br>1. Identify some medicines and their uses. | Background Information: Page 106 - 108.<br>Refer to Activity Sheet AD 17.<br>Show the students the overhead transparency.<br>Discussion:<br>- Do you know what this is?<br>- Do you know what is kept in here?<br>Using the drawing of the medicine cabinet or actual products which might be found in a medicine cabinet, point to the individual products. Ask the students if they know what each thing is. |

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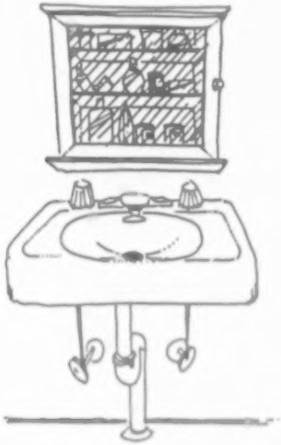
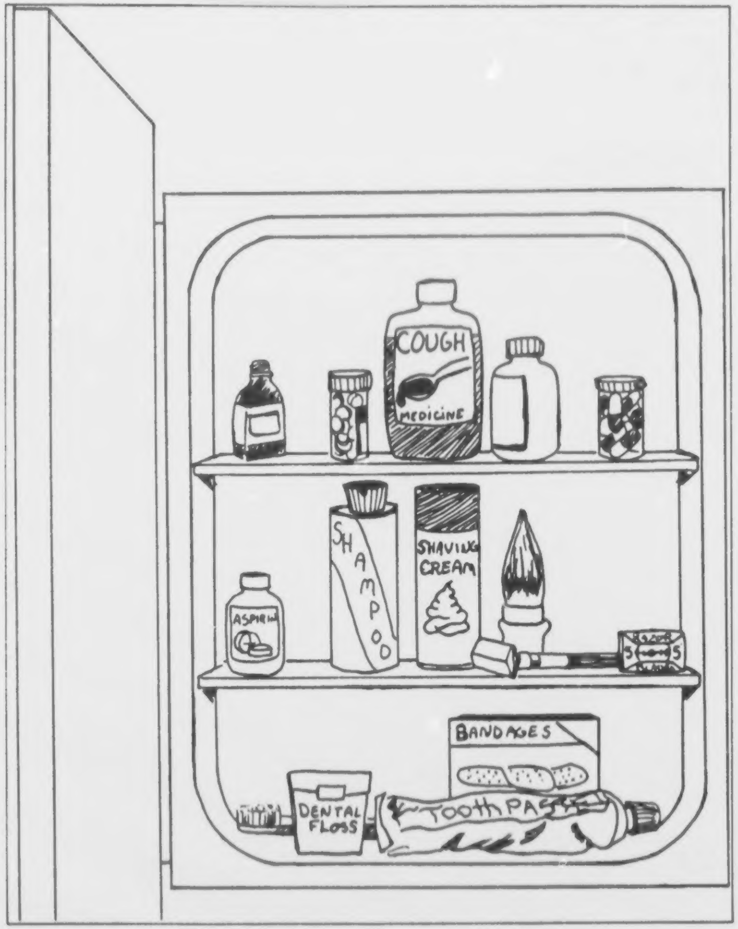
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Discussion:<br>- What do we use pills for?<br>- Cough syrup?<br>- Ear drops?<br>- Ointment? |
| | 2. Tell if they have ever been given medicines. | Let the students talk about times that they have been given medicine, why they were given it and who gave it to them. Ask them to tell if/how it helped them. |
| ii) explain why they should ask an adult they trust before taking any medicine | 3. Name people from whom they can safely take medicine. | Explain that although medicine can make you better, it can also be harmful if it is not used safely, and it should be given to you only by someone who knows. Compare this to eating berries from Lesson 2. Talk about some of the people whom children can safely take medicine from. |
| iii) identify safe methods of storing medicine | 4. Tell why they think medicine is kept in a special cabinet or in other safe places at home. | Refer to Activity Sheets AD 18A - AD 18B.<br>Ask the students if they now know why medicine is kept in a special cabinet. Discuss other places where medicine may be stored safely. Use overhead transparencies of other places at home where medicine may be stored safely. |
| | 5. Tell where medicine is kept in their homes. | Discussion:<br>- Talk about where medicine is kept in the students' homes. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | 6. Colour a drawing which shows where medicine is kept in their house. | Refer to Activity Sheet AD 19 and Activity Sheet AD 20.<br>Distribute the "Where is the Medicine in Your House?" worksheets and the letters for the parents. Explain that when the students go home, they have to make sure that the medicine is stored safely in their house. If it is kept in a medicine cabinet, they have to colour that drawing; if it is kept high up in the closet or cupboard, they have to colour that drawing; if they keep their medicine in another safe place, they have to draw their own picture.<br> |
| | 7. Take home the "Safe Home" certificate and put it up. | Refer to Activity Sheet AD 21.<br>NEXT DAY: Look at and talk about the drawings the students have brought back to school. All students should receive a "Safe Home" certificate. |
| | 8. Locate safe places to keep medicine in school or the Community Health Centre. | If there is a school medicine cabinet, students can be taken to see how medicine is stored in the school. Or, if it can be arranged, students can visit the community health centre to see where the medicine is kept. |

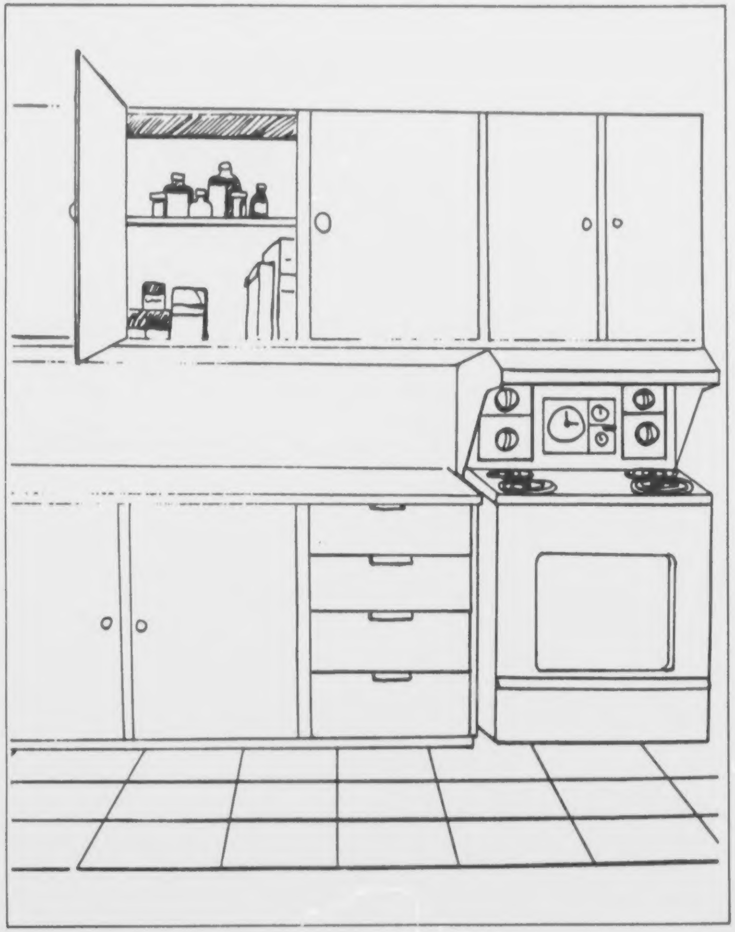
# A MEDICINE CABINET

AD 17


COUGH
MEDICINE
SHAMPOO
SHAVING CREAM
ASPIRIN
BANDAGES
DENTAL FLOSS
TOOTHPASTE

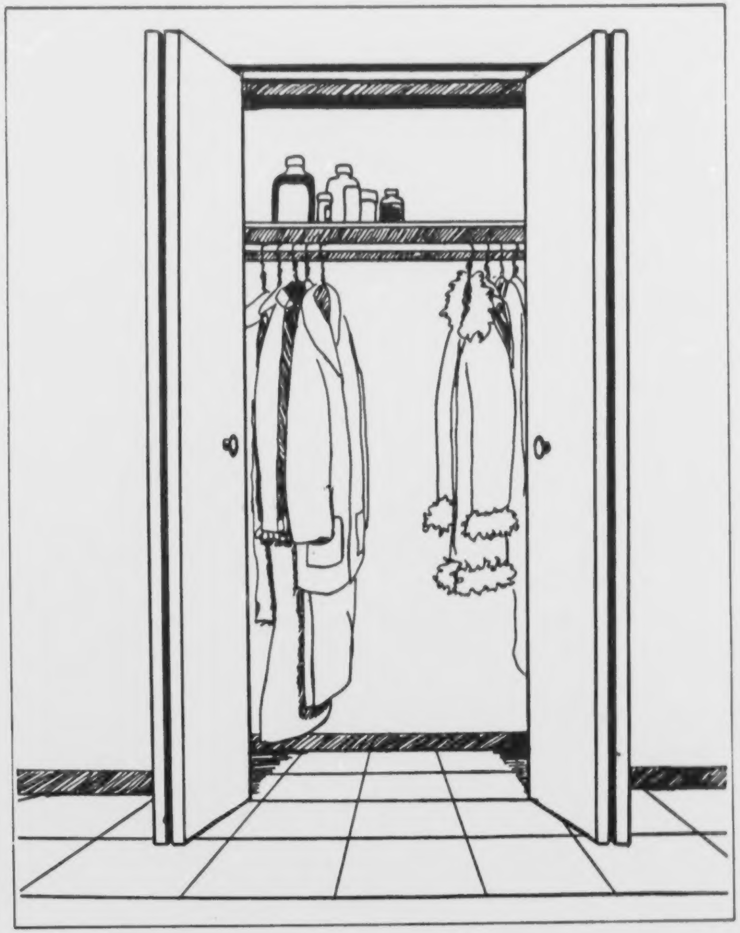
# OTHER SAFE STORAGE PLACES FOR MEDICINE

AD 18A



# OTHER SAFE STORAGE PLACES FOR MEDICINE

AD 18B

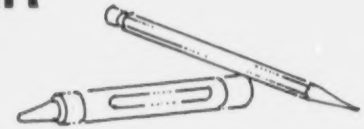


673

674

# PARENT LETTER

AD 19



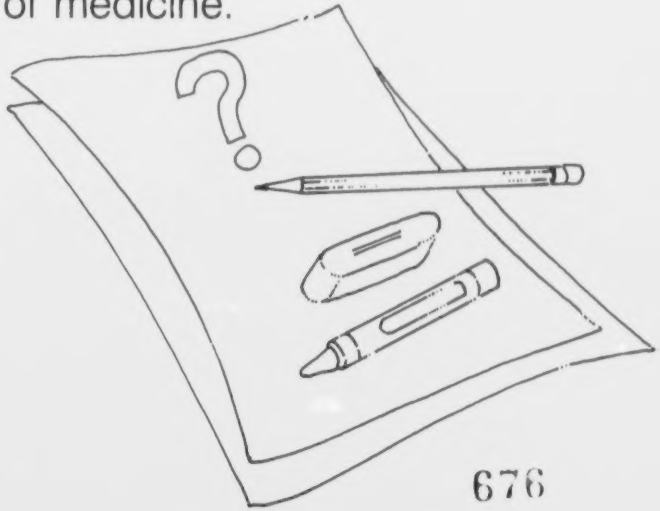
Dear Parents:

Today the children in our class have been learning that medicine can help make you better if you are ill, but it can also be harmful if not used safely. They have learned that medicine should be kept out of the reach of children. Now, with your help, they would like to make sure that the medicine in their own home is stored safely. On the worksheet, they have to colour the drawing which shows where the medicine is stored at home. If the medicine is stored in another safe place, please help your child to draw a picture of this other safe place in the blank space. They should bring the worksheet back to school tomorrow. They will then be given a certificate for helping to make sure that the medicine in their home is stored safely.

Thank you for helping our class to learn one of the rules of medicine.

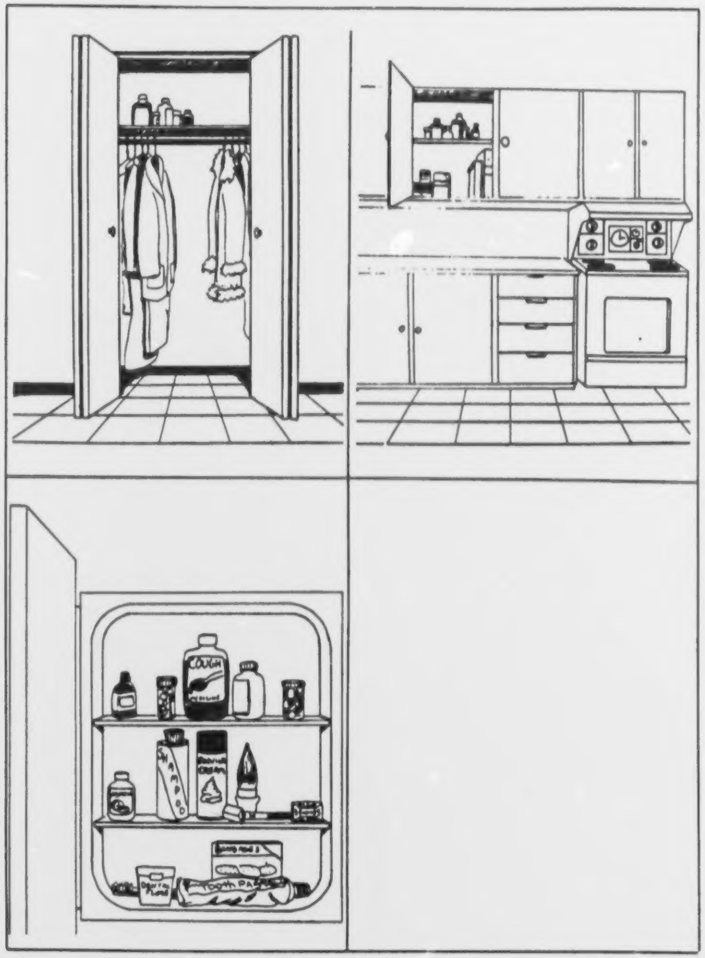
Yours sincerely,

(Teacher, Grade 1 class)



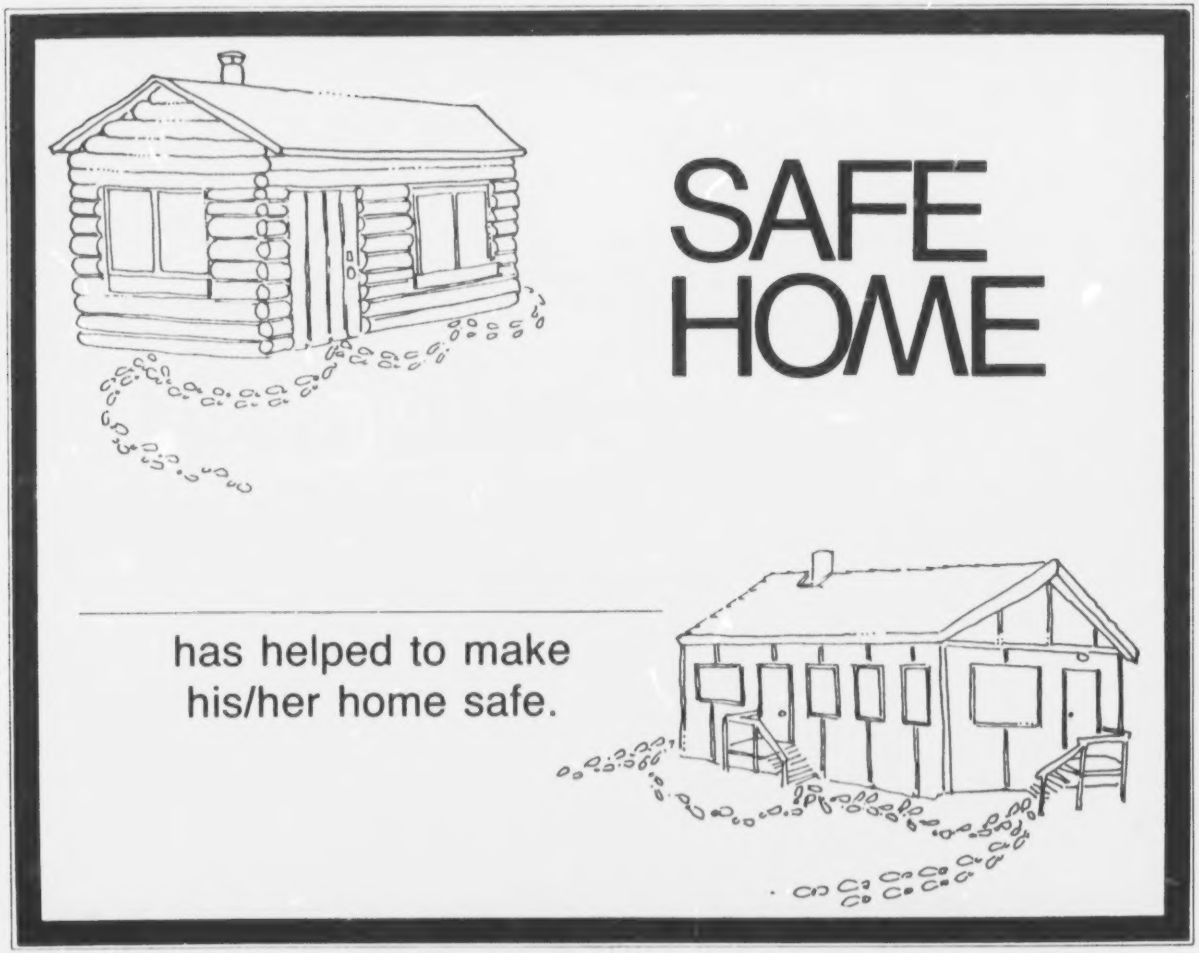
# WHERE IS THE MEDICINE IN YOUR HOUSE?

AD 20


COUGH
SHAMPOO
TOOTH PASTE

# SAFE HOME CERTIFICATE

AD 21



SAFE
HOME

______________________________

has helped to make
his/her home safe.

**ALCOHOL AND OTHER DRUGS**

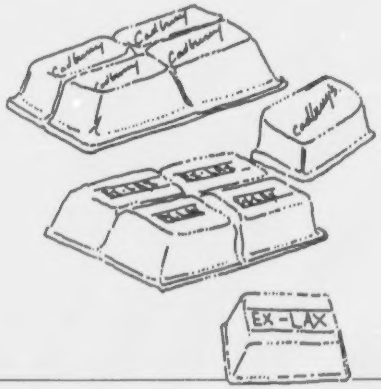
**GRADE 1** **LESSON: 5** **THEME: SAFETY**

**CONCEPT:** MEDICINE MAY BE HELPFUL, BUT MAY ALSO BE HARMFUL

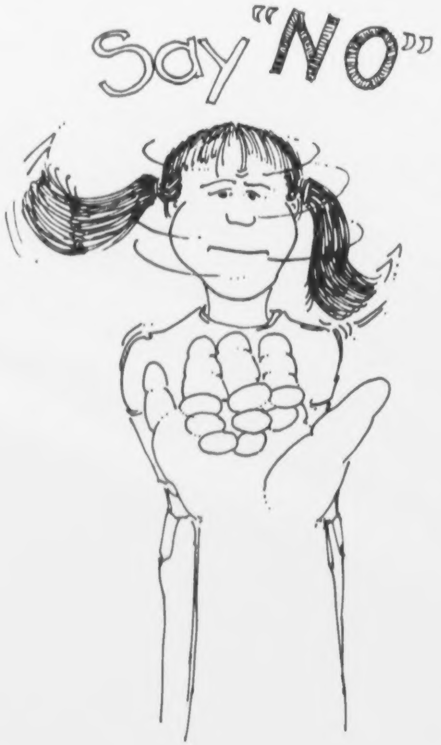
**PREPARATION:**

1. Obtain a sample of Ex-lax chocolate laxative (if available)
2. Collect a number of candies and medicines that look alike (for example: jelly beans and capsules)
3. Arrange for someone to dress up as a stranger and to come in to offer the students candies
4. Write the "Is It Safe For Me?" poem out on a large piece of paper or on the blackboard (Activity Sheet AD 22)
5. Art materials

**VOCABULARY:** same, safe, unsafe, pills, stranger

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) explain that candy and pills often look alike | Students:<br>1. Identify if various substances are candies or pills. | Background Information: Page 106 - 108.<br>Show the students the Ex-lax without its box. Ask the students what it is.<br> Cadbury<br>Cadbury<br>Cadbury<br>Cadbury<br>Cadbury's<br>EX-LAX |

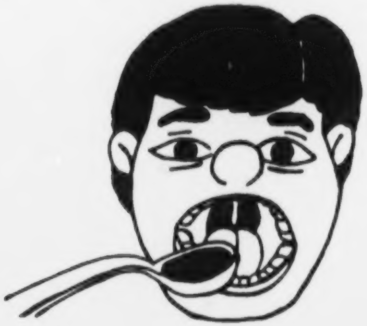
| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Then show the students the collection of look alike candy and pills. Ask them to tell you which is the candy and which is pills.<br>Tell the students which is which. |
| ii) explain that medicine may be harmful if not used safely | 2. Tell why it is important to take medicine only if a trusted adult gives it to them. | Recall from Lesson 3 that medicines "do things to people", for example cough syrup helps stop a cough, Tylenol helps lower a fever.<br>Show students a medicine with which they are not familiar. Ask them what it does. Explain that some medicines can make them very sick, or even kill them, if they are not taken safely. If they do not know what something is (pill or candy) they should not take it.<br>Ask how they know when and what medicine to take. |
| iii) explain why they should ask an adult they trust before tasting any unknown substance | 3. Tell what they would do if a stranger wanted to give them candy but they didn't know if it was safe to eat. | Discussion:<br>- If someone you don't know very well wants to give you a candy, but you don't know if it is safe, what would you do? **Don't taste it, tell an adult you trust!** |
| | 4. Learn "Is It Safe For Me?" poem. | Refer to Activity Sheet AD 22. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 5. Practise saying "No" to strangers offering candy. | Have someone come in dressed as a stranger to offer candies to the students. Let the students practise saying "No".<br><br> |
|  | 6. Draw a picture of someone who can safely give them medicine. | Ask the students to draw a picture of someone who can safely give them medicine. |

# “IS IT SAFE FOR ME?”

**AD 22**

I always ask first.
I always stop and think.
What is in that bottle?
Is it safe to drink?



If I am sick,
Or if I cut my knee,
I ask someone I know well
For the medicine that's for me.

I only ask people
Who know just what to tell.
A doctor, teacher, mom or dad,
They'll help me to stay well.

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**ALCOHOL AND OTHER DRUGS**

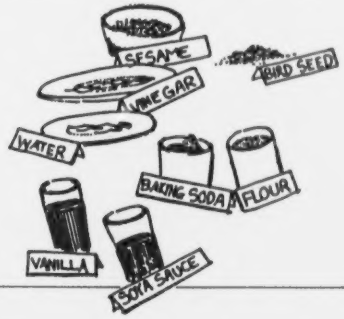
**GRADE 1** **LESSON: 6** **THEME: SAFETY**

**CONCEPT:** CHILDREN SHOULD ASK AN ADULT THEY TRUST BEFORE TASTING ANY UNKNOWN SUBSTANCE

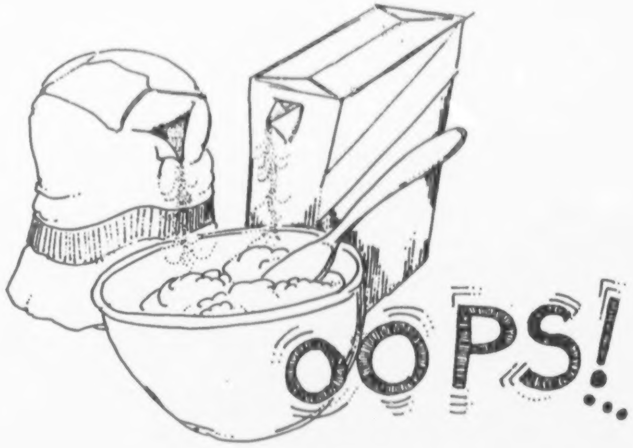
**PREPARATION:**

1. Collect samples of look alike substances, e.g. flour/baking powder; cornstarch/icing sugar; sugar/salt; water/vinegar. Put samples on saucers where students can clearly see them. Number them.
2. Make flannelgraph pictures for the story The Terrible Mistake (Activity Sheets AD 23A to AD 23F)
3. Flannelgraph board
4. A copy of The Terrible Mistake story (Activity Sheet AD 24)
5. Prepare a class set of "The Terrible Mistake" worksheets (Activity Sheet AD 25A and 25B)

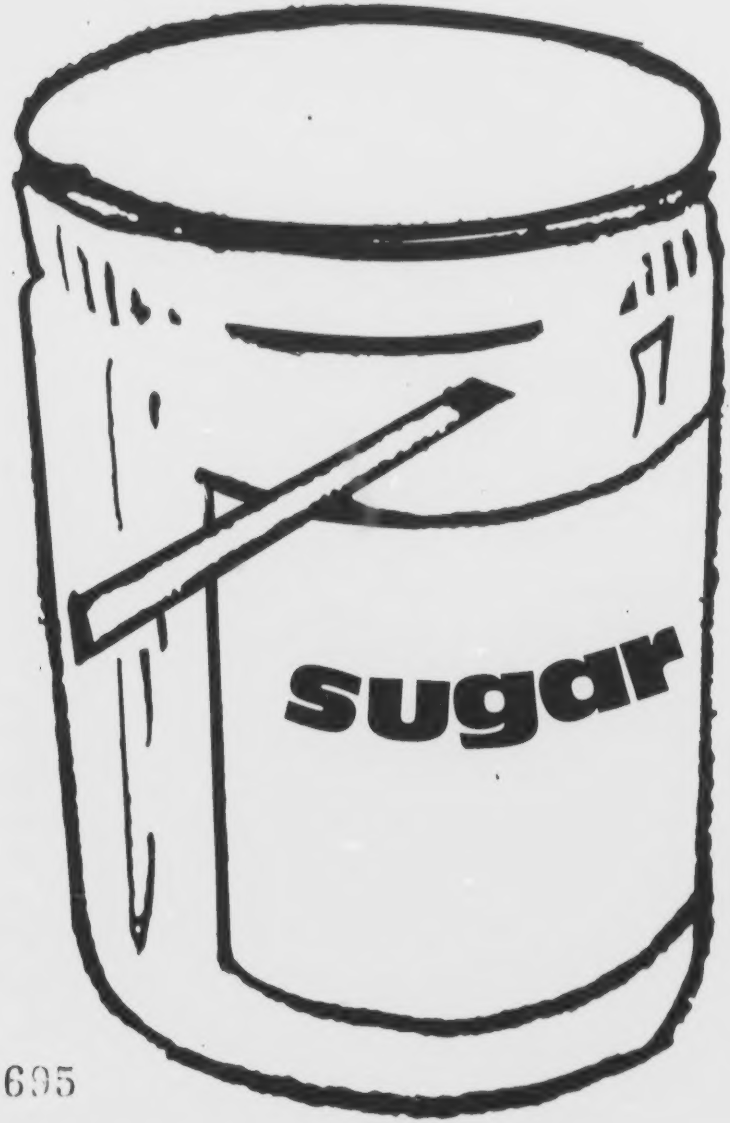
**VOCABULARY:** mistake, terrible, same, different, flour, baking soda, baking powder

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| Students will be able to:<br>i) explain why some substances cannot be identified by sight or smell | Students:<br>1. Identify the substances first by looking and then by smelling. | Background Information: Page 101.<br>Display the samples of substances collected.<br>Ask students to identify the substances, first by looking, then by smelling. (Explain that none of them is dangerous.)<br> SESAME<br>BIRD SEED<br>VINEGAR<br>WATER<br>BAKING SODA<br>FLOUR<br>VANILLA<br>SOYA SAUCE |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
| | | Discussion:<br>- Does everyone think it is the same thing?<br>- How can you tell what it is?<br>Explain that, even if something is in a box or a bottle, they must be careful, because people sometimes put them in other containers and don't write what is in them. Some substances cannot be identified by sight or smell. |
| | 2. Listen to "The Terrible Mistake" story and tell what mistake was made. | Refer to Activity Sheets AD 23A to AD 23F and Activity Sheet AD 24.<br>Tell the story, "The Terrible Mistake!", using the flannelgraph figures.<br>Discussion:<br>- Talk about what happened in the story, and about the mistake which was made.<br>- Luckily, it was only salt and sugar that Tommy and Sara mixed up. Can you think of some things that might have been worse? (Eventually you want the students to think of non-poisonous/poisonous substances, and candy/pills.) |
| ii) explain why they should ask an adult they trust before tasting any unknown substance | 3. Tell how they could avoid making a mistake like Tommy did. | Always ask an adult they trust if they cannot read a label or if they do not know what a substance is. |

| OBJECTIVES | STUDENT ACTIVITIES | TEACHER NOTES |
|---|---|---|
|  | 4. Colour drawings from the story "The Terrible Mistake", cut them out and match them to the correct sentence. | <br> <br>Refer to Activity Sheets AD 25A - AD 25B.<br>Distribute copies of the worksheets to the students. Explain that they have to colour the drawings. Then they have to cut them out and match them to the correct sentence. |

# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE AD 23A



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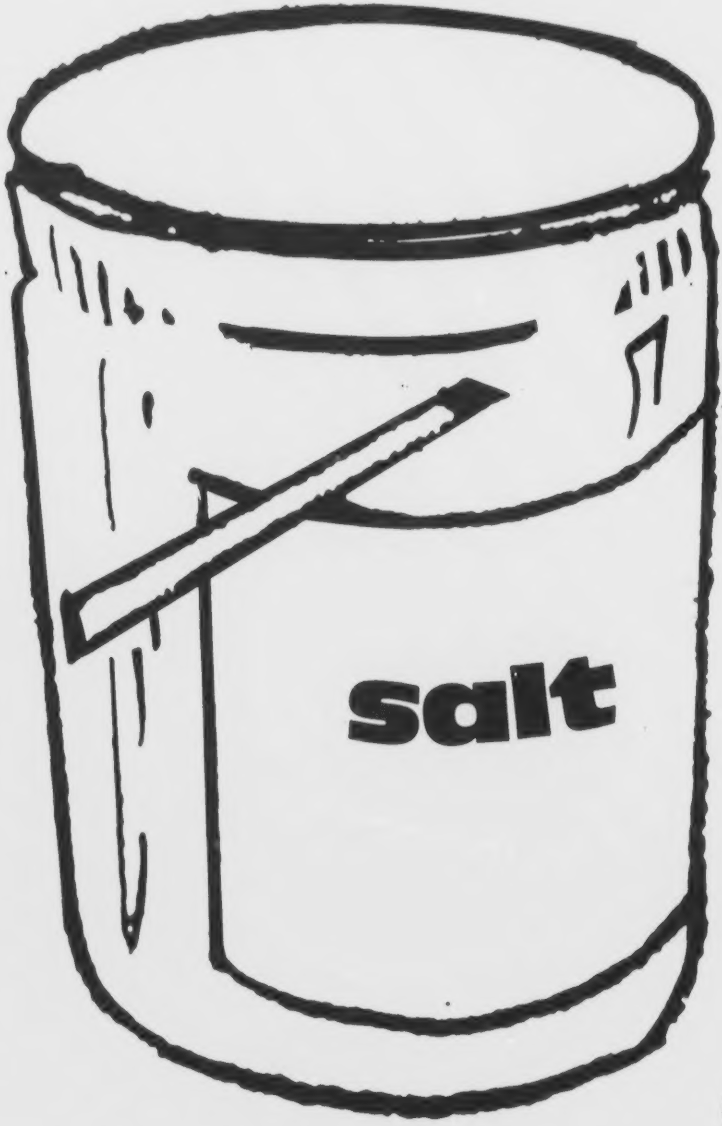

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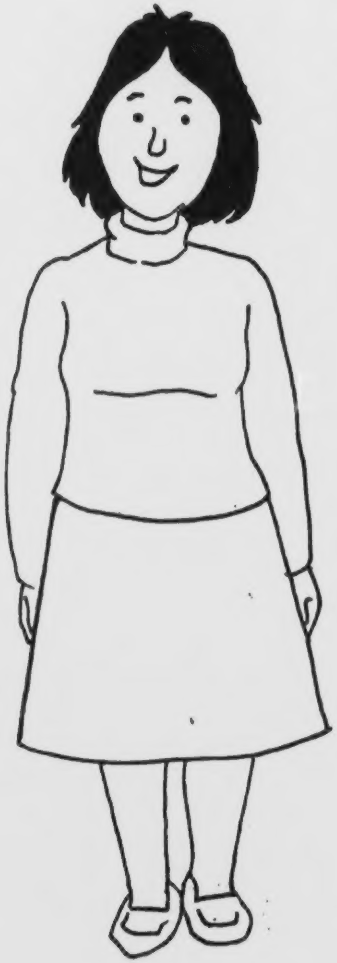
# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE AD 23B



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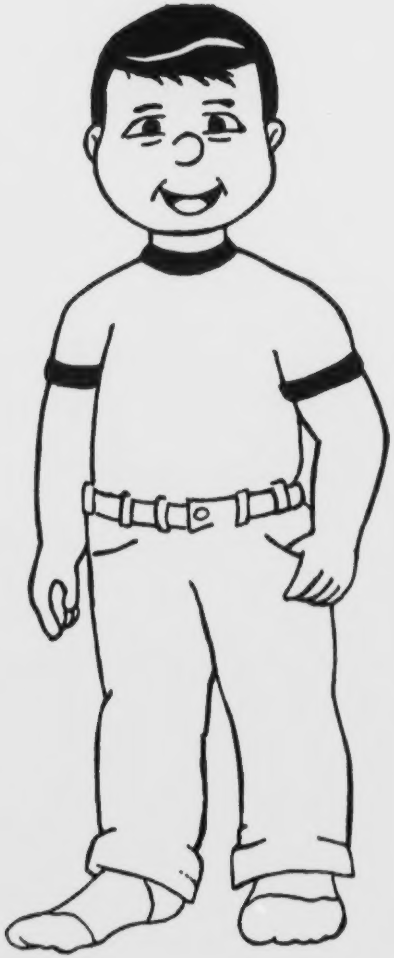
698

# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE AD 23C



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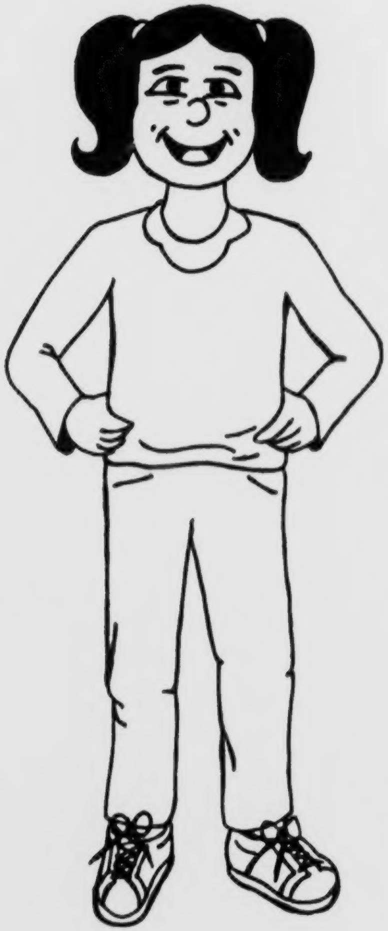
# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE AD 23D



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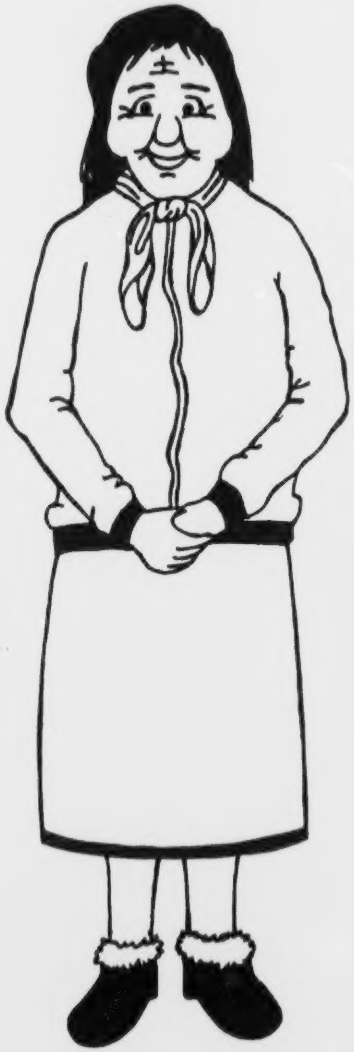
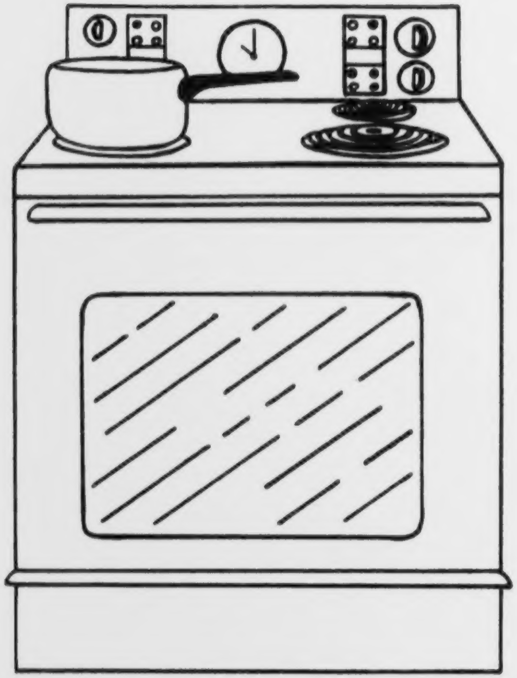
# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE

AD 23E



# FLANNELGRAPH PICTURES THE TERRIBLE MISTAKE AD 23F



# STORY: THE TERRIBLE MISTAKE

AD 24

It was a very cold winter day. Tommy ran home from school with his sister. Her name was Sara. Tommy's class had made soup at school today. He told Sara about it.

"We made caribou soup today, and then we ate it for lunch. It was very good soup, Sara."

Tommy ran into the house to tell his mother, but she wasn't there. He found a note from her. Sara read it. "I am at the nursing station with the baby. I will be home soon. If you are hungry, there are apples in the fridge."

"I know," said Tommy, "let's make soup for supper tonight. Grandad shot a caribou last week. We can use that."

Sara wasn't happy. She was older than Tommy. She knew that you had to be careful near the stove.

"Tommy, I don't want to make soup. The stove is hot. We could burn ourselves."

"But, Sara, you often help Mommy and Grandma to make bannock. You're good at cooking."

"All right," said Sara, "but we have to be very careful."

They looked for the big pot Mommy made soup in. They put water in it, then they cut up the meat and put it in the pot. They got some carrots and onions. They cut them up. They put the carrots and onions in the big pot. Then they got the bag of rice out of the cupboard. They put a cup of rice in the pot.

"Mmm!" said Tommy, "This will be good soup. Mommy will be very happy when she comes home!"

The door opened and Grandma came in.

"Grandma, Grandma!" Tommy shouted. "We're making caribou soup for supper tonight. I made caribou soup at school today. It was very good soup!"

"Well, that's nice, Tommy. But be careful you don't burn yourself on the stove," said Grandma.

"Sara can cook, Grandma," said Tommy. "She is very careful."

**AD 24 cont'd**

"Yes, she is," said Grandma. "Can I taste your soup?"

"Oh, yes," said Tommy. He ran to get a spoon.

Grandma tasted it. She made a funny face.

"You forgot to put salt in it!" she said. "You must put some salt in. Then it will be good soup. I am going to the store now."

Grandma went outside. Tommy took the big jar of salt out of the cupboard. He put some salt into the big pot.

Mother came home from the nursing station. She looked at the pot on the stove. "What are you cooking? It smells very good!" she said.

She got some bowls from the cupboard. She put some soup in them. Tommy took a spoonful. He spat it out as fast as he could and made a funny face.

"Oh, yuk! The soup tastes terrible!" he said.

"What's wrong with it?" asked Mother.

"It tastes sweet!" said Tommy.

Mother took a spoonful and tasted it too.

"It has sugar instead of salt in it! You put the wrong one into the soup."

She looked in the cupboard. There were two jars on the shelf. They LOOKED the same, but one said "SALT" and one said "SUGAR".

"The two jars look the same. The sugar and the salt look the same. You forgot to read what it said on the label! Sara can read. Tommy, you should have asked Sara what the labels said. You must be very careful. If you don't know what is in a jar or box, ask someone."

"Oh, what a terrible mistake!" said Tommy. "The soup is no good! We'll have to throw away all the soup!"

"It WAS a terrible mistake, Tommy. It is very easy to make mistakes like this. You have to be careful that you don't mix up things which look the same! This was only salt and sugar, but if you mix up something like candy and pills, you will get very sick!"

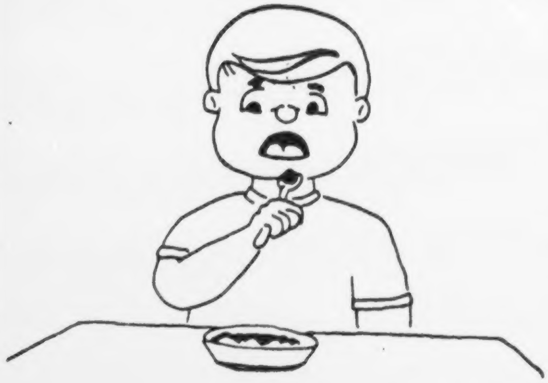
The door opened and Grandma came in again.

"I brought some stew. I made it this morning. I know Tommy and Sara made soup for supper. The stew will be good for tomorrow."

"Thank you, Grandma," said Tommy. "I made a terrible mistake. I mixed up the sugar and the salt. The soup tasted terrible! Now we can have stew for supper tonight!"

# WORKSHEET: "THE TERRIBLE MISTAKE"

1



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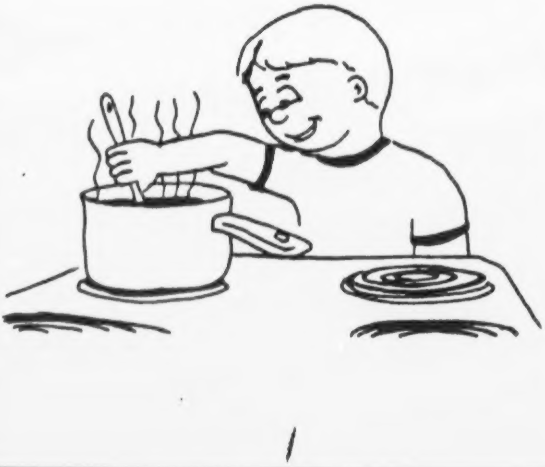

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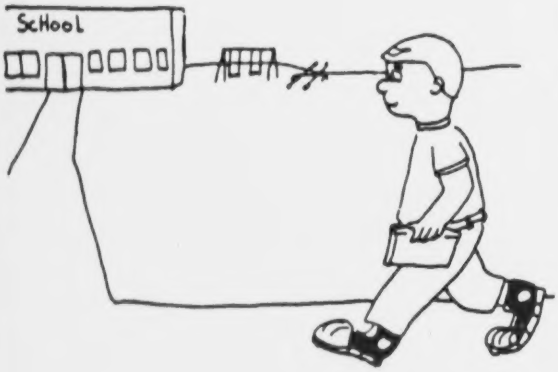

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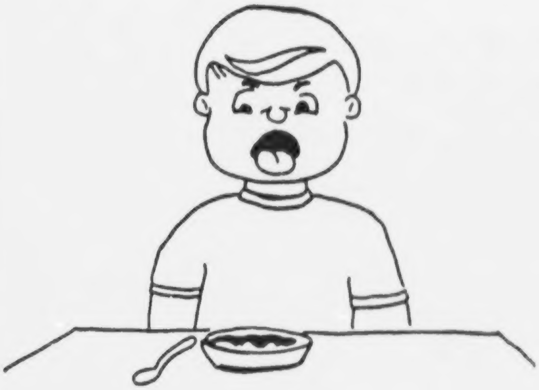

AD 25A

# WORKSHEET: "THE TERRIBLE MISTAKE"

AD 25B

| | |
|---|---|
| 1. | 2. |
| Tommy is going to school. | Tommy is making soup. |
| 3. | 4. |
| Tommy is eating soup. | The soup is terrible. |

# GRADE ONE
# TEACHER BACKGROUND INFORMATION

## ALCOHOL AND OTHER DRUGS

# Teacher Background Information Alcohol and Other Drugs

## THE MAIN THEMES

The three broad themes covered in the Kindergarten to Grade 3 portion of the Alcohol and Other Drugs Program are:

| | |
|---|---|
| - SAFETY | (This includes the development of safe attitudes towards such things as hazardous products, medicine, etc.) |
| - DRUGS | (Medicines are the first drugs on which students receive information. They later learn about other drugs.) |
| - WELL-BEING | (One of the main goals of the program is the development of healthy lifestyles. The relationship between responsible decisions involving hazardous products, medicines and other drugs and a person's well-being is emphasized.) |

Each theme is presented under a separate heading. If, for example, teachers want information on, say, poisons, they should first turn to the safety section, then locate poisons within that section.

# SAFETY

## Introduction

From a very early age, children can begin to develop safe attitudes towards particular situations or substances which have the potential for producing harmful results. As they learn to identify dangerous situations, or substances which may be harmful, and as they learn some of the rules associated with these, they will also begin to make responsible decisions, not only in terms of what is familiar to them, but they will also be able to deal with the unknown. In the theme on safety, students learn to recognize and handle potentially dangerous situations with regard to hazardous products, medicines and other drugs.

The most important point of these lessons on safety is that, if students do not know, or are not sure what a substance is, they should not touch it without first asking an adult whom they trust. If they are unsure about whether a specific situation is safe or unsafe, they should not participate in what is happening, again without first asking an adult.

'AN ADULT YOU TRUST' is used to signify either a grown-up whom the students know well and believe - for example, mother, father, grandmother, etc. - or someone who would have particular knowledge about these topics - for example, a health professional, such as a doctor or nurse. If children name an older brother or sister or a friend, that person would have to be old enough to have accurate information on hazardous substances, medicines, drugs, etc.

'SAFE' is used to describe an action or substance which does not hurt any person or any property.

'UNSAFE' is used to describe an action or substance which might possibly cause harm to a person or to property.

## Potentially Hazardous Substances

A potentially hazardous substance is any substance which may produce harmful results. These harmful results may occur as a result of either using the substance incorrectly or using it for a purpose other than that for which it was intended. These substances are designed for a specific purpose and are safe, if used with proper care for that purpose.

The potentially hazardous substances fall into the four categories which correspond to the four hazard warning signs:

- POISONOUS
- CORROSIVE
- FLAMMABLE
- EXPLOSIVE

It is important to remember, however, that, although they correspond to the warning signs, not all potentially hazardous substances have warning signs on them. Products such as those regulated under the Food and Drug Act or the Pest Control Act are not required by law to have hazardous product symbols displayed on their labels. For example, pure acetone is regulated by the Hazardous Product Act and must be labelled with the flammable and poisonous symbols. Nail polish remover, usually a dilute form of acetone, however, is a cosmetic and is regulated under the Food and Drug Act and does not have to display any hazard warning symbols.

In the early grades, it is not necessary for the students to learn the vocabulary associated with each hazard warning sign. It is sufficient for them to understand the meaning of the signs. However, if students are capable of using the correct vocabulary, they should certainly learn it.

## Methods of Identifying Potentially Hazardous Products

The following are not conclusive factors in determining if a substance is potentially harmful, however they can be used as indicators.

- A WARNING SIGN - Does the product have a warning sign on its container? Any product with a hazard warning sign on it could be dangerous.
- WHERE IT IS STORED - Is the product stored in a place where children cannot reach it, e.g. cleaning products on a high shelf? They may have been put there because they are dangerous.
- WHERE THE PRODUCT IS FOUND IN THE STORE - Is the product in the section with cleaning goods? Most household cleaners have the potential of being dangerous.
- THE DIRECTIONS FOR USE - Does the product state that certain precautions should be observed when using it, e.g. using it only in a well-ventilated area? Products which have specific cautions attached to their use are probably dangerous.
- WHAT THE PRODUCT IS USED FOR - Is it a household cleaning product, a medicine, supplies for painting or woodworking, insecticide, automotive (or similar) product, supplies for the yard, a cosmetic, an alcohol or tobacco product, a plant? All of these categories have the potential to be dangerous.
- CHILD-PROOF TOPS - Does the container have a child-proof top? If it does, it is because it could be harmful, if opened by a young child.

Children should be aware that products with any of these indicators may be dangerous. If they are unsure what something is, they should always ask an adult they trust before touching it.

## Different Degrees of Danger

Although not specifically taught as a lesson, teachers should be aware that the warning signs also indicate the degree of danger which may exist. The three shapes used are the triangle, the diamond and the octagon. The more sides the sign has, the more dangerous the product might be. The triangle has three sides and means that some caution is required when handling the substance; the diamond has four sides and is a warning of more serious danger; the octagon has eight sides and indicates very serious harm or danger.

## Safe Handling and Storage of Potentially Hazardous Substances

There are some generally accepted rules for safe handling and storage of potentially hazardous substances. Children should not only learn the rules, but understand why these rules are necessary, and observe them, whenever possible.

1. ALL HAZARDOUS SUBSTANCES SHOULD BE KEPT OUT OF REACH OF CHILDREN.

2. LIDS SHOULD BE KEPT TIGHTLY CLOSED ON ALL POTENTIALLY HAZARDOUS SUBSTANCES.

3. DO NOT USE FLAMMABLE SUBSTANCES NEAR THE FIRE, EVEN IF IT IS ONLY BURNING SLOWLY.

4. FLAMMABLE AND EXPLOSIVE SUBSTANCES SHOULD BE KEPT AWAY FROM HEAT AND FLAMES.

5. MATCHES SHOULD BE KEPT OUT OF REACH OF YOUNG CHILDREN.

6. NO SMOKING NEAR FLAMMABLE SUBSTANCES.

7. NEVER SMELL POTENTIALLY HAZARDOUS SUBSTANCES CLOSELY.

8. NEVER MAKE HOLES IN SPRAY CANS.

9. KEEP SPRAY CANS OUT OF REACH OF YOUNG CHILDREN.

## Poisonous Substances

Because poisons, their possible effects and the rules related to them are most closely associated with medicines and other drugs, these particular substances receive the most emphasis.

A poison is generally anything which is unsafe to taste, eat or drink. (There are also poisons which are unsafe to touch, e.g. poison ivy, or unsafe to smell, e.g. carbon monoxide gas.) The consequences of swallowing, or otherwise coming into contact with, a poison extend from a mild feeling of nausea, to more violent feelings of illness, to death.

The importance of children learning about poisons and rules related to everyday products cannot be over-emphasized. As more and more toxic household and industrial products appear, so are children more likely to come into contact with them. Our homes abound with potential dangers for our children - in the bathroom, under the sink, in basements, closets, garages and on and on.

Every year, thousands of young children die from accidental poisonings. In recent years the 10 most common items accidentally swallowed by young children were:

1. Children's A.S.A.
2. Bleach
3. Adult A.S.A.
4. Diaper-pail deodorizer
5. Chocolate-flavoured laxative
6. Children's fever drops
7. Cough syrup
8. Tranquilizers

9. Birth control pills
10. Cigarette butts

(Data supplied by the Hospital for Sick Children, Toronto)

Injuries, accidents and poisonings are one of the five most common reasons for visits to the Nursing Stations or hospitals in the Northwest Territories.

There are two main ways of reducing accidents related to poisons - one is to make children aware of the more common household poisons and the dangers associated with them; the other is to keep them out of the reach of young children preferably locked away, since young children like to climb and explore.

Areas which are most likely to contain poisons are the bathroom, the kitchen, the laundry room, the living room, the bedroom, the garage or shed and the basement or furnace room.

### *The Poison Warning Sign*

The universal POISON warning sign is:

Examples of products which carry the POISON warning sign are listed below:

- methyl hydrate
- gasoline (in a proper container)
- wood stain
- antifreeze
- turpentine
- Pledge furniture polish
- bug spray (not in an aerosol can)

### *Poisons With No Warning Signs*

There are, however, many common poisons which have no warning signs. Some of these are hair dye, moth balls, medicines, methyl alcohol, bleach, plants and berries. Although there are no poisonous berries in the Arctic, there are berries in the southern Northwest Territories which, if eaten, may make people feel ill.

A common cause of accidental poisoning is because people often keep potentially harmful substances in containers which were not intended for storing that particular substance and which are meant for harmless substances. This leads to confusion, for example, if a substance like gas is stored in a soft drink bottle. The container is unlikely to be labelled correctly. This means it is difficult to identify exactly what is in the container. Children should learn to be suspicious of the contents of soft drink bottles in places such as the garage or furnace room.

## *Some Potentially Dangerous Household Poisons*

### CLEANING, BLEACHING AGENTS

Metal cleaners and polishers
Detergents
Ethylene glycol
Dry cleaning fluids
Amyl acetate
Benzine
Carbon tetrachloride
Ammonia
Copper and brass cleaner
Turpentine
Cleaning fluids
Alcohol
Oxalic acid
Kerosene
Methyl alcohol
Naphtha
Petroleum distillates
Window washing fluid
Drain cleaners
Typewriter cleaner
Aerosols
Oven cleaner
Bathroom bowl cleaner
Gun cleaners
Lighter fluid
Bleach

### SOLVENTS

Paint remover
Wax remover
Grease spot remover
Lacquer remover
Nail polish remover
Paint thinner
Carbon tetrachloride
Kerosene
Methyl alcohol
Methanol
Turpentine
Lighter fluid
Petroleum products
White out

### POLISHES AND WAXES

Nail polish
Furniture wax/polish
Car wax
Kerosene
Silver polish
Pine oil
Mineral oil
Turpentine
Naphtha
Paint

### MISCELLANEOUS HOUSEHOLD PRODUCTS AND CHEMICALS

Epoxy glue
Model cement
Garden sprays
Insecticides
Pesticides
Strychnine
Herbicides
Rat Killers
Wax crayons
Inks
Fire extinguishing fluids
Rug adhesive
Rodenticides
Antifreeze
Carburetor cleaners
Gasoline
Anti-rust products
Deodorizing tablets
Plant food
Leather polishes and dyes
Shoe cleaners and polishes
Jewellery cleaners and cements
Laundry blueing

## COSMETIC PREPARATIONS

- Nail polish remover
- Dandruff shampoo
- Eye make-up
- Nail polish
- Corn and wart remover
- After shave
- Shaving lotions/creams
- Hair lotions
- Suntan lotions
- Resins
- Cuticle removers
- Cologne
- Permanent-wave solution
- Bubble bath
- Hair dyes/tints
- Hair remover
- Neutralizers
- Lacquers
- Skin preparations
- Plasticizers
- Hair sprays
- Perfume

## DRUGS AND MEDICINES

- Narcotics
- Antiseptics
- Vitamins
- A.S.A.
- Iron medicines
- Pain killers
- Clinitest tablets
- Rubbing alcohol
- Corn and wart remover
- Iodine
- Tranquilizers
- Birth control pills
- Laxatives
- Children's fever drops
- Cough syrup

(Most of the items in this category are only poisonous when taken orally by accident or in excess.)

## PLANTS/BERRIES

## *Important Factors About Poisonous Substances*

The most important factors for children to remember when they see a substance with a POISON warning sign are:

- IT IS NOT SAFE TO TASTE, EAT OR DRINK IT.
- IF SWALLOWED, IT MAY MAKE A PERSON ILL.
- IF SWALLOWED, IT MAY CAUSE THE PERSON TO DIE.
- NEVER TASTE ANYTHING WITH THIS SIGN ON IT.
- NEVER TASTE ANYTHING IF YOU DON'T KNOW WHAT IT IS.

## *Medicines Can Be Poisonous*

Students learn that there may be benefits derived from taking medicines, if someone is ill. However, medicines are also one of the most commonly accidentally swallowed substances and can be extremely dangerous if not used properly. To ensure that children do not take medicine on their own, medicine must be stored safely where children cannot reach it, preferably in a cabinet which can be locked.

It may be possible to arrange a visit to the local nursing station or drug store, where the students can see for themselves how medicine is stored correctly in these places.

Children also learn that they should never take medicine on their own or from a friend. They should take medicine only from an adult they know well and trust, or from a professional health care person. These people know which medicine children should take, and also how much medicine they should take. If children take the wrong medicine or the wrong amount, they may become very ill.

The labels on jars or bottles of medicines are very important. They contain information on whom the medicine is for, what kind of medicine it is, how much should be taken, when it should be taken and also an expiry date, since the effect of the medicine changes with time.

## *The Rules for Medicine*

To lessen the dangers of children being poisoned by swallowing medicine accidentally, there are certain basic rules which should be followed.

1. NEVER TAKE ANYONE ELSE'S MEDICINE.

   Every person is different. A medicine that works for one person may not work for another. It may make the other person ill.

2. FOLLOW THE INSTRUCTIONS ON THE LABEL.

   The label tells what kind of medicine it is, how much to take and when to take it.

3. USE MEDICINE ONLY IF YOU NEED IT.

   Medicines contain drugs and may be dangerous, because they change the way the body works. There are other ways of making people feel better - a hug, going for a walk, lying down.

4. CHILDREN SHOULD TAKE MEDICINE ONLY FROM AN ADULT THEY TRUST.

   Medicines may be dangerous. Children do not know which medicine to take, nor how much to take. They should not take medicine either from a friend their own age or a stranger.

5. KEEP MEDICINE OUT OF REACH OF SMALL CHILDREN.

   Medicine is often brightly coloured and looks attractive to a young child. Young children cannot tell the difference between candy and pills. To avoid the possibility of young children taking medicine accidentally, it should be stored where they cannot reach it.

6. NEVER USE MEDICINES THAT ARE OUT OF DATE.

   Medicines change over time. If they are old, they may not work in the same way, and may cause harmful reactions.

7. ALWAYS THROW OLD MEDICINE AWAY IN THE TOILET, NEVER IN THE GARBAGE.

   Medicine which is not disposed of carefully may be found by young children and swallowed accidentally.

8. ALWAYS TAKE MEDICINE IN A ROOM THAT IS WELL-LIT WHERE THE LABEL CAN BE CLEARLY READ.

   It is easy to confuse medicines which may look similar. It is also important to be able to read clearly the instructions on the label. The label contains important information about the medicine.

## *Mistaking Medicines for Candy*

A common reason for children accidentally taking medicine is because of its appearance. Many medicines are brightly coloured or are in shapes which are attractive to children, e.g. children's vitamins. Young children are accustomed to thinking that anything which is bright, sugar-coated etc. must taste good and, therefore, is safe to eat. A mistake which adults often make is to encourage children to think of medicine as candy or to suggest that it tastes like candy.

Exlax chocolate laxative is a very good example of candy and medicine looking alike. When asked what the laxative is, children will almost always identify it as a chocolate bar.

If the children find candies, they should not taste them without first checking with an adult they trust if they are safe to eat.

Another danger that children should be aware of is that of accepting candies from a person whom they do not know well. The person may be offering them some kind of pills. Children should be taught to tell an adult they trust about any such incidents.

## *Different Kinds of Medicines*

Depending on the community, medicine is obtained from different sources. In some communities, the nurse or doctor at the nursing station gives out medicine, when it is required; in other larger communities, the doctor will write out a prescription which the person must take to the drug store for the druggist to then give out the medicine. In some communities, local people may use parts of plants or animals from the land and make these into medicines, but there are usually only a few people in the community who have that particular knowledge, and other people would consult with them. All these cautions are observed because of the potential danger of the medicines.

In most communities, some kinds of medicines can be bought over-the-counter at the local store, e.g. Aspirin, cough syrup, etc. Although these medicines are readily available, they too can be dangerous, if not used properly.

It is not necessary for the students to know the vocabulary associated with the different kinds of medicines. It is sufficient for them to understand that there are different kinds of medicines, that we get them from different places and that they may all be harmful if not used correctly.

PRESCRIPTION MEDICINE

- obtained by prescription from medical personnel

NON-PRESCRIPTION MEDICINE

- purchased directly from a store, without requiring a prescription

TRADITIONAL MEDICINES

- obtained from plant or animal sources

* NOTE - Traditional medicine is an integral part of native culture - it should be considered as such and must be treated with respect. Teachers should understand that not all people who are knowledgeable about traditional medicines are willing to discuss them, particularly with non-native people. It is important for teachers to respect such feelings, and where information on traditional medicines is not available from local people, students should be simply made aware that, for some people, this is another source of medicines. Any lesson on traditional medicines should involve local elders or respected community members knowledgeable in this area.

## *Drug Stores in the N.W.T.*

In most communities in the Northwest Territories, drugs are given out by personnel in the nursing stations. The larger communities, however, have drug stores. These drug stores are located as follows:

- YELLOWKNIFE
- INUVIK
- IQALUIT
- HAY RIVER
- FORT SMITH

## Corrosive Substances

### *The Corrosive Warning Sign*

The universal CORROSIVE warning sign is:

Examples of products which carry the CORROSIVE warning sign are listed below:

- chlorine bleach
- toilet bowl cleaner
- drain cleaner
- paint stripper
- oven cleaner
- metal polish
- tire cleaner

### *Important Factors About Corrosive Substances*

The most important factors for children to remember when they see a CORROSIVE warning sign are:

- IT MAY HURT THE EYES OR SKIN.
- IT MAY GIVE A PERSON BLISTERS.
- IT MAY BURN THE SKIN.
- NEVER LET ANYTHING WITH THIS SIGN TOUCH YOUR SKIN OR EYES.
- NEVER TOUCH ANYTHING WITH THIS SIGN.

## Flammable Substances

### *The Flammable Warning Sign*

The universal FLAMMABLE warning sign is:

Examples of products which carry the FLAMMABLE warning sign are listed below:

- cleaning solvent
- paint remover
- rubber cement
- wood stain
- paint thinner
- fondue fuel
- automobile, snowmobile or motor bike products

### *Important Factors About Flammable Substances*

The most important factors for children to remember when they see a FLAMMABLE warning sign are:

- IT MAY CATCH FIRE.
- IT MAY BURN YOU OR YOUR CLOTHES OR YOUR HOUSE.
- NEVER LET ANYTHING WITH THIS SIGN NEAR HEAT OR FLAMES.
- NEVER PUT NEAR A FIRE.

## Explosive Substances

### *The Explosive Warning Sign*

The universal EXPLOSIVE warning sign is:

Examples of products which carry the EXPLOSIVE warning sign are listed below:

- most products in metal containers designed to be released under pressure (spray cans)
- insect spray
- furniture polish
- rug cleaner

### *Important Factors About Explosive Substances*

The most important factors for children to remember when they see the EXPLOSIVE warning sign are:

- IT MAY BLOW UP.
- IT MAY EXPLODE.
- NEVER PUT ANYTHING WITH THIS SIGN NEAR HEAT OR FLAMES.
- NEVER PUT SPRAY CANS NEAR HEAT OR FLAMES.
- NEVER PUT HOLES IN SPRAY CANS.
- NEVER PUT NEAR FIRE.

# DRUGS

## What Are Drugs?

When someone uses the word 'drugs', many people immediately think of illegal drugs, such as marijuana. The word 'drugs', however, has a much broader meaning.

The simplified definition of a drug is used for the elementary portion of the program:

ANYTHING THAT IS PUT INTO THE BODY THAT MAKES IT WORK DIFFERENTLY.

This would include such products as toothpaste, deodorant, mouthwash, medicines - all of which change the way the body works, and which do, in fact, contain drugs.

Since medicines are often the first drugs with which students may have contact, the concept of what a drug in the broadest sense is begins with a look at medicines. Medicines and the effects they have on a person's body are familiar to the students. Most students will know, for example, that if a person takes an Aspirin for a headache, the usual effect is for the headache to go away. In other words, the Aspirin somehow changes the way the body is working. Students learn that all medicines contain drugs.

Food can also have an effect on how the body works, but it is important to emphasize to students that drugs cause changes that are different from the way the body works NORMALLY. These changes may, or may not, be evident to the eye.

There are many other commonly-used substances which contain drugs and belong to the drug family. These include glue, gas, cola drinks, coffee, chocolate products, tea, cigarettes, other tobacco products, and alcohol.

When teachers are discussing drugs with their classes, some students may list marijuana, cocaine and other illegal drugs. They will often have been exposed to these on television. Although the materials for the early grades do not include references to illegal drugs, teachers should be prepared to include them in a list of members of the drug family, if students themselves bring them up.

## The Effects of the More Common Drugs

The effects of drugs on the body (i.e. how they make a person's body work differently) have to be very much simplified for students in the early grades to understand.

The following is a simplified list of the effects of the more common drugs:

i) gas, glue, paint fumes (other solvents)
   - dizziness
   - sickness
   - sneezing, coughing
   - headaches
   - strange behaviour

ii) caffeine (found in cola drinks, coffee, tea, hot chocolate, chocolate)
   - brain works faster
   - hand shakes
   - sleeplessness

iii) nicotine (found in cigarettes, tobacco, chewing tobacco, snuff)
   - brain works faster
   - coughing
   - spitting
   - heart works harder

iv) alcohol (found in all spirits and alcoholic beverages - also found in a different form in substances such as anti-freeze)
   - brain slows down
   - slurred speech
   - difficulty walking properly
   - strange behaviour

v) medicines
   * the effect of each medicine is different, depending on what drug it contains

Because drugs are able to change the way the body works, they must be handled with care. It is important for students to understand that drugs themselves are neither good nor bad. It is the way in which they are used which determines whether they are helpful or harmful.

## WELL-BEING

Well-being is a (w)holistic health term which represents a positive health state in physical, mental, spiritual, emotional and cultural areas. Everyone is located somewhere on the continuum of wellness between a high-level of well-being or death. The choices which a person makes with regard to his/her lifestyle affect that well-being.

The attitudes which a person develops towards potentially hazardous substances, towards medicines and towards other drugs, and the choices which that person makes with regard to these have an impact on his/her well-being.

Prevention is also important in terms of well-being. Prevention is when we take positive steps to stop something from happening, e.g. fire prevention. Although the students may not be familiar with the word 'prevention', they will be familiar with the concept. Knowing and observing the rules for handling medicines, for example, is a behaviour which prevents accidents. This in turn affects the person's well-being; if he were to take too much medicine, he might become ill - this would move him lower down the continuum of well-being. This concept will be important later on when students discuss alcohol and other drugs and the prevention of drug abuse.

People are asked to make decisions on an on-going basis, in terms of their own well-being. In order to make responsible decisions, they have to be provided with accurate information about the possible consequences of that decision. The decision which is made, however, does not depend solely on information, it is also influenced by other people - for example, friends, family, community members - and by other things such as advertising.

There are reasons why people choose to do things, but there are also positive reasons why people choose NOT to do things. Understanding the concept, that people choose NOT to do things because of its effect on their well-being, for example, will later help students to an understanding of why people choose NOT to use, or abuse, alcohol and other drugs.

## NWT ALCOHOL AND DRUG PROJECTS

Aklavik Alcohol Action Committee
P.O. Box 27
Aklavik
X0E 0A0

Arctic Red River Alcohol & Drug Program
General Delivery
Arctic Red River
X0E 0B0

Baker Lake Alcohol and Drug Program
P.O. Box 149
Baker Lake
X0C 0A0

Coppermine Alcohol Awareness Centre
P.O. Box 271
Coppermine
X0E 0E0

Delta House
P.O. Box 2304
Inuvik
X0E 0T0

Fort Franklin Basic Awareness Program
General Delivery
Fort Franklin
X0E 0G0

Fort Good Hope Alcohol and Drug Program
General Delivery
Fort Good Hope
X0E 0H0

Fort Liard Alcohol and Drug Program
General Delivery
Fort Liard
X0G 0A0

Fort Norman Drop In Centre
General Delivery
Fort Norman
X0E 0K0

Fort Resolution Alcohol and Drug Program
General Delivery
Fort Resolution
X0E 0M0

Fort Simpson Area Counselling
P.O. Box 470
Fort Simpson
X0E 0N0

Fort Smith Alcohol and Drug Program
P.O. Box 957
Fort Smith
X0E 0P0

Hay River Alcohol and Drug Abuse Program
P.O. Box 338
Hay River
X0E 0R0

Hay River Dene Band -
Alcohol & Drug Abuse Program
P.O. Box 1638
Hay River
X0E 0R0

Holman Alcohol & Drug Program
General Delivery
Holman Island
X0E 0S0

House of Hope
P.O. Box 265
Tuktoyaktuk
X0E 1C0

Igloolik Alcohol and Drug Awareness Program
General Delivery
Igloolik
X0A 0L0

Katimavik Centre
P.O. Box 81
Cambridge Bay
X0E 0C0

Kingnait Aulatsivik
General Delivery
Cape Dorset
X0A 0C0

Knute Lang Camp Project
P.O. Box 27
Aklavik
X0E 0A0

Lake Harbour Katiniit Committee
General Delivery
Lake Harbour
X0A 0N0

Lutsel K'e Drug and Alcohol Program
General Delivery
Snowdrift
X0E 1A0

Northern Addiction Services Rehabilitation Program
P.O. Box 1072
Yellowknife
X1A 2N8

Pangnirtung Alcohol Education Committee
P.O. Box 253
Pangnirtung
X0A 0R0

Peel River Alcohol Society
P.O. Box 99
Fort McPherson
X0E 0J0

Pond Inlet Health and Social Services
General Delivery
Pond Inlet
X0A 0S0

Rae Edzo Counselling Services
P.O. Box 85
Rae
X0E 0Y0

Rankin Inlet Addictions Project
P.O. Box 310
Rankin Inlet
X0C 0G0

Sapuniaqtit
General Delivery
Arviat
X0C 0E0

Spence Bay Alcohol and Drug Education Project
General Delivery
Spence Bay
X0E 1B0

Tree of Peace Alcohol and Drug Program
P.O. Box 2667
Yellowknife
X1A 2P9

Tuvvik
P.O. Box 269
Iqaluit
X0A 0H0

Wrigley Alcohol and Drug Solvent Abuse Program
General Delivery
Wrigley
X0E 1E0

Zhahtie Koe Alcohol and Drug Program
General Delivery
Fort Providence
X0E 0L0

## DICTIONARY

| | |
|---|---|
| accident: | anything which happens unexpectedly and is not planned; the results of an accident could be harmful. |
| behaviour: | the way someone acts. |
| bleach: | a poisonous cleaning liquid used to make clothes white. |
| blister: | a water swelling under the skin. |
| bug spray: | a poisonous liquid which can be put on bugs to kill them. |
| cabinet: | is a safe place to keep things; it has shelves and a door; a 'medicine cabinet' is a safe place to keep medicines. |
| cigarette: | has a drug in it; it is tobacco rolled in paper; the rolled tobacco can be burned and the smoke sucked through the mouth and breathed out again. |
| cleanser: | a liquid or a powder substance used for cleaning; it can be harmful if not used in the right way, and usually has a sign on it to tell you how to use it. |
| corrosive: | being able to eat away something; for example, the rust is corrosive, that is, the rust is eating away at the car. |

| | |
|---|---|
| cough syrup: | a liquid medicine used when a person is sick with a cough; directions for safe use are printed on the bottle. |
| dangerous: | any action which makes a situation not safe. |
| drug: | anything that is put into the body that makes it work differently. |
| drug store: | a store where you can buy medicines and other things such as soap, toothpaste, kleenex, candy. |
| explode: | to burst into pieces, to blow up. |
| explosive: | capable of bursting into pieces, of blowing up. |
| flammable: | capable of catching fire easily. |
| fumes: | a strong smelling gas or smoke. |
| ear drops: | a liquid medicine put into the ears when a person is sick with an ear ache or a cold. |
| Ex-lax chocolate laxative: | a medicine taken to cause a bowel movement; the chocolate covering on the medicine is to make it taste better. |
| glue: | a substance used for sticking things together; it can have harmful or unsafe fumes. |
| hazard: | risk or danger. |
| hazard warning signs: | tell you the substance can be dangerous; the sign means there is a rule to follow to use the substance safely. |

| | |
|---|---|
| identify: | to find out who or what someone or something is; to be able to tell things apart. |
| label: | a piece of paper or card stuck on something showing what it is, and what it should be used for. |
| medicine: | a liquid or a pill taken for an illness; medicine can be harmful if not used safely. |
| non-prescription: | medicines which we can buy in the store without the doctor's permission. |
| Nursing Station: | a place where people can go if they are hurt or feeling sick; the nurse will look closely at the person to find out what is wrong, and may give the person medicine. |
| ointment: | a soft greasy substance used for healing cuts and sores. |
| permission: | written or spoken words that allow someone to do something. |
| pharmacist: | knows a lot about medicines; a pharmacist gets directions from a doctor on which medicine to give someone who is sick. |
| pills: | a little tablet or ball of medicine to be swallowed. |
| poison: | anything which is unsafe to taste; a poison may cause serious illness or death. |
| poisonous substances: | substances which are unsafe to taste; and may cause serious illness or death. |

| | |
|---|---|
| poison warning sign: | shows that people should not taste, eat or drink the substance with the sign on it. |
| prescription: | a piece of paper with the name of the medicine and how much and how often the sick person has to take it; the doctor gives the sick person the prescription, and it allows the person to buy the medicine. |
| prevent: | something that could be done to stop something from happening; for example, brushing your teeth every day could stop tooth decay and toothaches. |
| responsible: | able to be trusted. |
| rules: | tell you what to do and what not to do; rules are needed to know what to do with medicines and unsafe substances. |
| storage: | a place for keeping things safely away. |
| store: | to keep something safely away. |
| substance: | any material; what a thing is made of; for example, the bottle is full of a sticky substance. |
| swallowed: | to allow food or liquid or medicine to pass down the throat. |

| | |
|---|---|
| traditional: | something that has been passed from parents to children; something done over and over; ‘traditional medicine’ is from the land. In some communities, if someone is ill, he/she would go to one of the old people who knows about land medicine, and the old person would pick some of the plants from the land or find a particular part of an animal and would make medicine from it. |
| unconscious: | a person is alive and breathing but is stunned and not able to see or feel anything. |
| well-being: | - is how a person feels about himself/herself and the world around him or her.<br>- a person’s overall feeling about his or her physical and mental health.<br>- the state of a person’s physical and mental health. |

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